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► To cite this version:

Abdellah Oussi, Cyrille Bouvet. Managing Emotions in Panic Disorder: A Critical review of studies related to Emotional Intelligence, Alexithymia, Emotion Regulation, and Coping. 52nd Annual Congress, Sep 2022, Barcelone, Spain. hal-04240206

HAL Id: hal-04240206

<https://hal.parisnanterre.fr/hal-04240206>

Submitted on 13 Oct 2023

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Managing Emotions in Panic Disorder: A Critical review of studies related to Emotional Intelligence, Alexithymia, Emotion Regulation, and Coping

Introduction

- Panic disorder is defined by recurring and unexpected panic attacks accompanied by anticipatory anxiety about future attacks and their consequences. This generally involves avoiding situations and behaviors that can produce panic attacks (American Psychiatric Association [APA], 2013).
- Among anxiety disorders, panic disorder is associated with some of the greatest burdens in terms of personal suffering, occupational disability, and societal cost.
- Different theoretical models of panic disorder postulate that the disorder results from a combination of: biological vulnerabilities (e.g.: hypersensitivity of the fear network), psychological vulnerabilities (e.g.: anxiety sensitivity) and recent stressful life events (e.g.: losses). These different models, although rich and varied, appear to be based on modest empirical evidence, which is sometimes even controversial. None of these models explicitly integrates emotional variables, identified in recent research, with emotion regulation or emotional intelligence.

Objective

- Review the empirical literature on emotional management processes and strategies associated with panic disorder, with the aim of synthesizing and assessing the current state of empirical knowledge in this area.

Methodes

Literature search

Search terms	"panic disorder" OR "panic attacks" OR "panic" AND "coping" OR "emotion regulation" OR "emotional intelligence" OR "alexithymia" OR "suppression" OR "acceptance" OR "cognitive appraisal" OR "experiential avoidance".
Electronic databases	PsycINFO, MEDLINE and Academic Search Premier

Inclusion criteria

- Articles had (a) to be published in a peer-reviewed journal, (b) to be published between: Jan 1990-Sep 2021, (c) to include participants over 18 years of age and suffering from PD, d) to be written in English and e) to be based on validated questionnaires or a methodology based on an experimental procedure.

Results

Patients with panic disorder have:

Emotional Intelligence (EI) (5 studies)

- low EI scores (ability and trait) compared to healthy subjects, specifically in terms of understanding and managing emotions,
- EI scores similar to those of people with other anxiety disorders (GAD, OCD), but inferior to those of people with social phobia on the interpersonal side (empathy and identifying emotions of other people),
- EI levels that may negatively impact their agoraphobia levels.

Alexithymia (17 studies)

- elevated alexithymia levels compared to healthy subjects, especially in identification and description of feelings,
- high alexithymia levels compared to people with simple phobia disorder (mixed results are noted for OCD and no difference was seen with social phobia),
- alexithymia levels which can be modulated by pharmacological or psychological treatment,
- alexithymia levels which predict PD severity and PD symptomatology, such as dissociation.

Emotion Regulation (19 studies)

- a marked tendency to suppress and restrict the experience and expression of negative emotions,
- a greater awareness of negative emotions, as well as a greater difficulty in labeling emotions,
- an impaired Cognitive reappraisal,
- choice of ER strategies is impacted by patients' perceptions and beliefs about emotions.

Coping (15 studies)

- use more coping strategies focused on avoidance (behavioral and cognitive), self-blame, positive reappraisal and help seeking than healthy subjects,
- use fewer problem-solving-focused coping strategies than healthy subjects,
- use the same coping strategies as subjects with other anxiety disorders such as GAD, Social Phobia and hypochondria.

Conclusion

- These different aspects of emotional management play an important role in the development and maintenance of panic disorder.
- These results also, suggest interest in offering panic disorder patients interventions that target specific emotional management deficits associated with their disorder.