

The Effectiveness of Cognitive-Behavioral Therapy on Severity of Symptoms and Quality of Life in Patients with Panic Disorder: A Case Study

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Introduction

Panic disorder (PD) is a severe anxiety disorder characterized by recurrent panic attacks, anticipation and worry about further panic attacks and their potential consequences, as well as dysfunctional reassurance and avoidance behaviors aimed at preventing them. Panic disorder disrupts a person's performance in important areas of life and negatively effects on quality of life. Therefore, the present study was conducted with the purpose of evaluate the effectiveness of cognitive-behavioral therapy on symptoms and quality of life (QoL) among people with panic disorder in Ahvaz city.

Method

The research method was experimental single subject with non' concurrent multiple baseline design trials. The statistical population of the study consisted of all individuals with panic disorder referring to counseling centers in Ahvaz from February 2020 to August 2020. Three of them were selected using available sampling, and randomly between 3 and 5 baseline sessions were considered for them. The treatment program was carried out for 10 weekly sessions derived from the cognitive-behavioral therapy protocol, with a follow-up period of 6 weeks after treatment termination. Data were collected from the Structured Clinical Interview for DSM-5 Disorders (SCID-5-CV), Beck Anxiety Inventory (BAI) and Quality of Life Questionnaire (WHOQOL). Clinically Significant Improvement (CSI), Visual Analysis, and Reliable Change Index (RCI) were used to analyze the data.

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Results

Results showed that panic symptom severity decreased with CBT. Participants achieved a 52/69 percentage of recovery in BAI, and 55/03 percentage of recovery in QOLQ. These results indicate the effective effect of cognitive behavioral therapy on reducing the symptoms of panic disorder and increasing the quality of life in the participants. Also, the results of the reliable change index in Beck anxiety scores after the intervention sessions were (2.25 for the first participant), (2.57 for the second participant), and (2.90 for the third participant). After 6 weeks' follow-up, the reliable change index was in the first participant (2.45), the second participant (2.78), and the third participant (2.81). Considering that the score of each participant reached above $Z = 1.96$, it is possible to attribute the change or improvement obtained to the effect of the intervention with a 95% confidence level ($P < 0.05$). The result of the reliable change index in quality of life scores after follow-up indicates that in some subscales, the improvement was caused by the intervention and treatment. The rate of reliable change index was calculated for the first participant in the quality of life subscales, respectively, physical (6.37), psychological (4.28), social (1.99), and environmental (2.47). In the second participant, physical (6/37), psychological (4/28), social (2/63) and environmental (1/23), and in the third participant, physical (5/14). Psychological (3.25), social (0.63), and environmental (1.44) were obtained. In other words, cognitive behavioral therapy was effective in decreasing panic symptoms and increasing quality of life.

Conclusion

According to the results of this study, panic disorder is common and can lead to significant disruption in daily functioning and reduce quality of life. Using both cognitive and behavioral techniques is effective in improving a person's performance and improving panic symptoms, as well as improving the quality of life. Accordingly, cognitive behavioral therapy CBT for treating panic disorders and improving quality of life may be useful in Iranian clinical settings. In other words, results from the present study indicate that a CBT protocol of acceptability in patients with PD can be successfully delivered in this population.

Keywords: Cognitive behavioral therapy, Panic disorder, Quality of life

Author Contributions: Author 1 was responsible for leading the overall research process. Author 2 was responsible for research plan design, data collection and analysis and all authors discussed the results, reviewed and approved the final version of the manuscript.

Acknowledgments: The authors thank all dear participants who have helped us in this research.

Conflicts of interest: The authors declare there is no conflict of interest in this article.

Funding: This research is not sponsored by any institution and all costs have been borne by the authors.