



Pergamon

Anxiety Disorders  
16 (2002) 455–474

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JOURNAL  
OF  
**Anxiety  
Disorders**

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# Anxiety sensitivity as a predictor of the development of panic symptoms, panic attacks, and panic disorder: a prospective study

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Received 19 October 2000; received in revised form 22 March 2001; accepted 17 May 2001

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## Abstract

The purpose of the study was to examine how anxiety sensitivity (AS) acts as a dispositional factor in the development of panic symptoms, panic attacks, and panic disorder. Between 1986 and 1988, data were collected from 505 undergraduates at an urban university. At Time 1, measures used were the ASI to assess AS, the trait scale of the State-Trait Anxiety Inventory (STAI-T) to measure trait anxiety, and self-report questionnaires to measure personal and family history of panic and anxiety symptoms. During the Spring of 1999, 178 of these subjects were re-contacted, and information was gathered on subjects' subsequent development of panic symptoms, panic attacks, panic disorder, and trait anxiety (STAI-T). The ASI was the strongest predictor of the development of panic symptoms and panic attacks. After controlling for trait anxiety, the ASI was not predictive of the development of panic disorder.

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*Keywords:* Anxiety sensitivity; Panic attacks; Panic disorder

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## 1. Introduction

Panic disorder, with and without agoraphobia, affects a substantial proportion of the population. The Diagnostic and Statistical Manual of Mental Disorders

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(rev. 4th ed.; DSM-IV) of the American Psychiatric Association (1994) estimates that each year 1.5–3.5% of the world's population will experience a spectrum of symptoms in a discrete period of time constituting a panic attack. Panic is not limited to clinical populations. Surveys of non-clinical populations reveal that a significant proportion of the population experience such attacks (Norton, Dorward, & Cox, 1986; Norton, Harrison, Hauch, & Rhodes, 1985). Findings from Telch, Lucas, and Nelson's (1989) study of approximately 2000 college students suggested that lifetime prevalence rates are as high as 12%.

A panic attack is frequently followed by a pattern of behavior change designed to minimize the possibility of similar future attacks. This behavior change may take the form of avoidance or special precautions. Moreover, behavior changes may become progressively more elaborate as well as emotionally and financially disruptive. The chronic nature of the disorder means that these negative changes are long-lasting and exponential in their impact on an individual's quality of life. Currently, clear predictors of the development of anxiety-spectrum difficulties are unavailable. Given the extent of suffering resulting from panic disorder, improvements in identification of markers and prevention efforts are greatly needed.

One variable that has shown potential as a predictor of future panic is anxiety sensitivity (AS). AS theory is a cognitive theory examining "the individual differences in what people think will happen to them when they experience anxiety" (Peterson & Reiss, 1992). People with high AS, as measured by the Anxiety Sensitivity Index (ASI; Reiss, Peterson, Gursky, & McNally, 1986), have a greater belief that the symptoms of anxiety will be harmful or have harmful consequences beyond initial unpleasantness (Reiss, 1991; Reiss & McNally, 1985). In contrast, people with low AS endure symptoms as unpleasant but not incapacitating.

Research supports the Reiss and McNally (1985) view that high AS may precede experience of a panic attack. Peterson and Sacks (1987) found that the ASI distinguished students who had experienced recent panic attacks (ASI = 21.1, S.D. = 8.9,  $N = 105$ ) from those who had not (ASI = 16.3, S.D. = 8.1,  $N = 155$ ). In a college sample of 425 students, Donnell and McNally (1990) found that not only was the proportion of subjects reporting panic in the high AS category significantly higher (32.4%) than the low and medium AS categories, but 46 of the high AS subjects (68%) had no history of panic symptoms. Therefore, the presence of high AS is not determined by previous experiences with unpredictable panic symptoms.

A strong argument for the utility of AS relative to trait anxiety is provided by research demonstrating that AS accounts for a greater proportion of the variance than trait anxiety in the prediction of panic. Donnell and McNally (1990) examined the relationship of AS to results of a hyperventilation through CO<sub>2</sub> inhalation challenge test. The ASI was more predictive than history of panic symptoms. In fact, history of panic was only contributory in individuals with high ASI scores. These findings have been supported by other hyperventilation and CO<sub>2</sub> challenge studies. Telch, Silverman, and Schmidt (1996) established that the

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