Agoraphobia

Agoraphobia is a mental health disorder in which a person fears going out in public places where he or she may feel helpless, trapped, or embarrassed in the event of a panic attack. People with this condition have a fear of losing control during a panic attack, and they often start to avoid the situations that they fear or insist on having another person go with them.

Agoraphobia may interfere with normal daily activities and personal relationships. People with severe agoraphobia may become completely homebound and dependent on others for daily tasks, such as grocery shopping and taking care of errands.

Agoraphobia is a type of anxiety. It usually begins before age 35, but it can start in older adult years. People with agoraphobia are at risk for other anxiety disorders, depression, and substance abuse.

What are the causes?

The cause of this condition is not known. A variety of factors such as fear of sensations and emotions in anxiety (*anxiety sensitivity*), family history of anxiety (*genetics*), and stressful events may contribute to this condition.

What increases the risk?

You are more likely to develop this condition if:

- You are a woman.
- You have a panic disorder.
- You have family members with agoraphobia.

What are the signs or symptoms?

You may have agoraphobia if you have any of the following symptoms for 6 months or longer:

- Intense fear arising from two or more of the following:
 - Using public transportation, such as cars, buses, planes, trains, or ships.
 - Being in open spaces, such as parking lots, shopping malls, or bridges.
 - Being in enclosed spaces, such as shops, theaters, or elevators.
 - Standing in line or being in a crowd.
 - Being outside the home alone.
- Fear of being unable to escape or get help if feared events occur. These events include:
 - Panic attack.
 - Loss of bowel control in older adults.
- Reacting to feared situations by:
 - Avoiding them.
 - Requiring the presence of a companion.
 - Enduring them with intense fear or anxiety.
- Fear or anxiety that is out of proportion to the actual danger that is posed by the event and the situation.

How is this diagnosed?

This condition is diagnosed based on:

- Your symptoms. You will be asked questions about your fears and how they have affected you.
- Your medical history and your use of medicines, alcohol, or drugs.
- Physical exam and lab tests. These are usually ordered to rule out other problems that may be causing your symptoms.

You may be referred to a mental health specialist (psychiatrist or psychologist).

How is this treated?

This condition is usually treated using a combination of counseling and medicines.

- Counseling or talk therapy. Talk therapy is provided by mental health specialists. The following forms of talk therapy can be especially helpful:
 - Cognitive behavioral therapy (CBT). CBT helps you to recognize and change unrealistic thoughts and beliefs that contribute to your fears. You will learn that body changes associated with anxiety (such as increased heart rate and breathing) are completely normal and expected.
 - Exposure therapy. This type of therapy helps you to face and overcome your fears in a relaxed state and in a safe environment. Exposures are usually approached in a systematic way, starting with situations that provoke less fear and building up to situations that provoke more intense fear. Exposure therapy includes:
 - Imagined exposure. You will imagine fearful situations and expose yourself to them in your mind.
 - In vivo exposure. You will face your fears in the real world, such as by standing in a crowded place for a few minutes.
 - Interoceptive exposure. In a safe environment, you will practice experiencing body changes that are associated with panic attacks. One example is breathing through a straw to experience breathlessness.
- Medicines. The following types of medicines may be helpful:
 - Antidepressants. These can decrease general levels of anxiety and can help to prevent panic attacks.
 - Benzodiazepines. These medicines block feelings of anxiety and panic.
 - Beta-blockers. Beta blockers can reduce physical symptoms of anxiety, such as sweating, tremors, and a racing heart. They may help you to feel less tense and anxious.

Follow these instructions at home:

Lifestyle

- Try to exercise. Get 150 or more minutes of physical activity each week. Also aim to do strengthening exercises two or more times a week.
- Eat a healthy diet that includes plenty of vegetables, fruits, whole grains, low-fat dairy products, and lean protein. **Do not** eat a lot of foods that are high in solid fats, added sugars, or salt (*sodium*).
- Get the right amount and quality of sleep. Most adults need 7–9 hours of sleep each night.

- **Do not** drink alcohol.
- **Do not** use illegal drugs.

General instructions

- Take over-the-counter and prescription medicines only as told by your health care provider.
- Keep all follow-up visits as told by your health care provider. This is important.

Where to find more information

• For more information, visit the website of the Anxiety and Depression Association of America (ADAA): www.adaa.org

Contact a health care provider if:

- Your fear or anxiety gets worse.
- You have new fears or anxieties.

Get help right away if:

- You have trouble breathing or have chest pain that you believe may not be part of a panic attack.
- You have serious thoughts about hurting yourself or someone else.

If you ever feel like you may hurt yourself or others, or have thoughts about taking your own life, get help right away. You can go to your nearest emergency department or call:

- Your local emergency services (911 in the U.S.).
- A suicide crisis helpline, such as the National Suicide Prevention Lifeline at 1-800-273-8255. This is open 24 hours a day.

Summary

- Agoraphobia is a type of anxiety disorder that causes a person to avoid situations that he or she fears, such as being in public or being in crowded spaces.
- People with agoraphobia often have panic attacks. They may avoid situations in which they feel escape is difficult or panic attacks are likely to occur.
- Agoraphobia is treated with medicines or cognitive behavioral therapy (CBT).

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Released: 05/09/2012 Document Revised: 08/09/2018 Document Reviewed: 08/09/2018 Elsevier Interactive Patient Education © 2020 Elsevier Inc.