

Agoraphobia

Agoraphobia is a type of anxiety disorder. A person with agoraphobia is afraid to leave environments they know or consider to be safe. In severe cases, a person with agoraphobia considers their home to be the only safe environment. They may avoid leaving their home for days, months or even years.

Translated, agoraphobia means 'fear of the marketplace'. Generally speaking, busy public places (such as supermarkets, shopping centres, trams, trains, planes and airports) are feared the most. However, any public place – even a quiet church or an empty park – may seem threatening to a person suffering from agoraphobia.

Typically, agoraphobia often starts off as a mild anxiety about a particular event, place or situation that escalates over time into a generalised fear of being in public. Mental health experts believe that the root of agoraphobia is fear of the physical and mental sensations of anxiety and, often, of panic or of losing control or embarrassing oneself. A person with agoraphobia is unwilling to visit 'unsafe' places, because they are afraid that doing so will trigger anxiety or a panic attack.

Symptoms of agoraphobia

The symptoms and signs of agoraphobia may include:

- anxiety in response to being away from an environment that is seen as 'safe'
- symptoms of significant anxiety and sometimes a panic attack such as breathlessness, sweating, dizziness, fast heart rate, sensation of choking, nausea, and feelings of extreme fear or dread
- anticipation of anxiety if the person is required to leave their safe environment
- low self-esteem and loss of self-confidence
- reluctance to leave the house or venture beyond familiar surrounds
- depression, which can sometimes accompany the condition.

Agoraphobia develops over time

Agoraphobia usually begins with a stressful event. For example, a person loses a job or a relationship ends. They feel distressed and limit their contact with the outside world (this is called 'avoidance behaviour'). As time passes, the person may consider more and more public places as 'out of bounds' until they are eventually confined to their home.

In other cases, a stressful life event triggers a panic attack. Since panic attacks are so unpleasant, the person may avoid any situation or place that they think might trigger another attack until many situations and places are eventually feared and avoided.

Complications of agoraphobia

Untreated, agoraphobia can severely reduce a person's quality of life. For example:

- Activities outside of the home such as work, school, socialising, hobbies and many forms of exercise are out of reach.
- Financial hardship, isolation, loneliness and boredom may lead to greater feelings of distress and increase the risk of depression.
- The person may recognise that their fear is irrational, but feel powerless to do anything about it. They may feel angry and frustrated with themselves. These negative feelings damage self-esteem and contribute to depression, and other anxieties and fears.
- The person may try to cope using unhealthy methods (such as comfort eating, drugs or alcohol), which in turn can cause or contribute to further health problems.

Diagnosis of agoraphobia

Diagnosis is usually based on the person's reported symptoms. However, the doctor may run a series of medical tests to make sure the symptoms are not caused by an underlying physical illness. The doctor may suggest referral to a psychologist or psychiatrist for further evaluation and treatment.

Treatment for agoraphobia

Agoraphobia responds well to treatment. The treatment options suggested by your doctor or therapist will depend on your circumstances and preferences, but may include:

- a course of medications, such as antidepressants or anti-anxiety medications
- cognitive behaviour therapy and desensitisation
- counselling and self-esteem therapy
- relaxation training
- support group
- instruction in self-help methods.

Self-help methods to manage agoraphobia

The key to conquering agoraphobia is learning to control anxiety symptoms and progressively going into the situations that you fear.

Be guided by your doctor or therapist, but general self-help suggestions include:

- **Breathe slowly** – hyperventilation (breathing too fast and too shallow) will make the symptoms of a panic attack worse. Consciously slow your breathing. Concentrate on expanding your abdomen, not your chest, with every inhalation.
- **Use relaxation techniques** – learning to relax may include methods such as meditation, hypnotherapy or regular exercise. You may need to experiment to find the relaxation method or methods that work best for you.
- **Find out about your condition** – overcoming agoraphobia involves understanding how anxiety affects the mind and body.
- **Change your lifestyle** – it may help to limit or avoid caffeine, alcohol and certain medications. Regular exercise burns off stress chemicals and is known to reduce anxiety levels. See your doctor for further information and advice.
- **Gradually increase exposure** – this involves facing the feared environment in a controlled way. This will help you to see that nothing bad is going to happen. Typically, you choose the least threatening environment first, take along a trusted friend or your therapist as support, and use slow breathing and the other coping methods you've learned to control your anxiety. With regular practise, the fear of the place or situation will ease. This technique is also known as desensitisation.

Where to get help

- Your doctor
- Clinical psychologist
- Psychiatrist
- Your local community health centre
- ARAFEMI (Association of Relatives and Friends of the Emotionally and Mentally Ill) Tel. (03) 9810 9300
- Mental Health Foundation of Australia (Victoria) Tel. (03) 9427 0406
- Anxiety Recovery Centre Victoria Tel. (03) 9830 0533 or 1300 ANXIETY (269 438)

Things to remember

- Agoraphobia is a type of anxiety disorder.
- A person with agoraphobia is afraid to leave environments they know and consider to be safe for fear of having anxiety or a panic attack.
- Agoraphobia responds well to treatment.

This page has been produced in consultation with, and approved by:

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