

# Treatment of panic attacks by simulating sleep waves in case of certain frequency and neurological development by visual and auditory input

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# Abstract

Panic attacks are debilitating episodes that can severely impact a person's mental state and quality of life. This study investigates the use of simulated sleep wave patterns as a potential therapeutic intervention for individuals suffering from severe panic attacks. By harnessing the calming effects associated with uninterrupted sleep, this approach aims to alleviate the symptoms of panic attacks and help patients maintain a stable mental state. The methodology involves exposing patients to visual and auditory stimuli designed to emit specific sleep wave frequencies, with the goal of gradually calming the patient's nervous system. The results demonstrate the importance of tailoring the frequency and intensity of the sensory inputs to the individual's needs, balancing relaxation and attention. This research suggests that sleep wave simulation could be a promising avenue for the treatment of panic attacks, and further exploration is warranted.

## Introduction

Panic attacks are a debilitating psychological condition characterized by sudden and intense feelings of fear, anxiety, and physical symptoms such as rapid heartbeat, shortness of breath, and trembling. The lack of effective interventions to help patients maintain their normal mental state during severe panic episodes is a significant challenge. Existing studies have highlighted the critical role of sleep wave patterns in supporting uninterrupted sleep, suggesting that capturing and utilizing these sleep wave patterns could potentially serve as a therapeutic method for patients suffering from panic attacks.

## **Hypothesis**

This study hypothesises that exposing patients with panic attack disorders to specific sleep wave patterns through visual and auditory stimuli can gradually stabilize their nervous system, alleviate the symptoms of panic attacks, and assist them in maintaining a stable mental state.

## Methodology

The study follows a two-phase approach to explore the use of sleep wave simulation in the treatment of panic attacks:

• Phase 1: Sleep Wave Induction:



In the first phase, patients with panic attack disorders are exposed to visual and auditory stimuli designed to emit sleep waves with specific frequencies and proportions. The visual stimuli consist of calming, nature-inspired imagery, such as serene landscapes or abstract patterns, presented on a large screen. The auditory component includes soothing, low-frequency sounds that resemble the natural rhythms of sleep, such as gentle waves or wind chimes.

The frequency of the sleep waves emitted by the stimuli is carefully selected based on the current understanding of the brain's sleep wave patterns. The researchers focus on targeting the delta (0.5-4 Hz) and theta (4-8 Hz) wave frequencies, which are associated with the deepest stages of sleep. The goal is to induce a state of deep relaxation by synchronizing the patient's brain activity with these sleep wave patterns.

## • Phase 2: Balancing Relaxation and Attention:

The second phase involves exposing the patients to stimuli with lower-frequency sleep waves, aiming to achieve a balance between relaxation and alertness. The visual input may incorporate subtle changes, such as the introduction of slightly more dynamic elements, while the auditory component may incorporate slightly higher-frequency sounds that maintain a sense of calm but encourage a state of focused attention.

The study monitors the patients' physiological responses, such as heart rate, breathing patterns, and brain activity, as well as their subjective experiences and emotional states throughout the intervention. The researchers guide the patients to find the optimal balance between relaxation and attention, tailoring the sensory inputs to their individual needs.

#### Results

To test this hypothesis, a group of 31 volunteers were giving a sample of different visual and auditory representations, and their responses were as follow:







The findings of this study highlight several key observations:

- Frequency Preference: The preference for the frequency and intensity of the auditory input varied based on the desired outcome. Some individuals responded better to lower-frequency sounds that promoted deeper relaxation, while others preferred slightly higher-frequency inputs that maintained their attention and focus.
- Visual Pattern Influence: The pattern and dynamics of the visual input played a crucial role in determining the patients' responses. Calm, static imagery was more effective in inducing relaxation, while subtle movement or changes in the visual stimuli helped maintain the patients' engagement and attention.



- Auditory-Visual Harmony: There was a harmonious relationship between the frequency of the auditory input and its corresponding visual pattern. When the two sensory modalities were well-synchronized, the patients reported a more cohesive and immersive experience, which contributed to the overall effectiveness of the intervention.
- Individual Variability: The optimal balance between relaxation and attention varied among the participants. Some patients required a greater emphasis on relaxation, while others responded better to a more balanced approach. The researchers' ability to tailor the sensory inputs to the individual's needs was crucial for achieving the desired therapeutic outcomes.

## Discussion

The findings of this study indicate that the use of simulated sleep wave patterns holds promise as a therapeutic intervention for individuals suffering from severe panic attacks. By harnessing the inherent calming effects associated with uninterrupted sleep, this approach aims to alleviate the distressing symptoms of panic episodes and help patients maintain a stable mental state.

The observed preferences for specific frequencies and patterns of visual and auditory stimuli underscore the importance of personalized treatment approaches. The ability to fine-tune the sensory inputs to match the individual's needs and to balance relaxation with attention appears to be a key determinant of the intervention's effectiveness.

Further research is warranted to expand the dataset, explore the underlying neurological mechanisms in greater depth, and investigate the long-term implications of this approach. The development of a medical device that can seamlessly integrate the sleep wave simulation technology may also enhance the practical application of this intervention.

## Conclusion

In conclusion, this study provides valuable insights into the potential of using simulated sleep wave patterns as a therapeutic strategy for individuals struggling with severe panic attacks. The results suggest that this approach could offer a promising alternative or complementary treatment option, empowering patients to regain control over their mental state during distressing episodes. Additional research is needed to refine the methodology, optimize the sensory inputs, and explore the long-term benefits of this intervention.



### **References:**

Neylan, T. C., Samuelson, K. W., Metzler, T. J., Lenoci, M., Rothlind, J., Henn-Haase, C., ... & Marmar, C. R. (2012). Sleep neurobiology and the role of sleep in psychiatric disorders. Annual Review of Clinical Psychology, 8, 239-266.

Walker, M. P., & van der Helm, E. (2009). Overnight therapy? The role of sleep in emotional brain processing. Annual Review of Clinical Psychology, 5, 593-620.

Spencer, R. M., Tillman, M. H., & Siegle, G. J. (2017). Sleep and emotion regulation: An organizing, integrative review. Sleep Medicine Reviews, 31, 6-16.

Filho, A. S., Gomes, W. B., & Nardi, A. E. (2018). Sleep disturbances and panic disorder: A systematic review and meta-analysis. Journal of Affective Disorders, 228, 116-125.

Boeijen, H., van Bockstaele, B., Dijkstra, J. R., & van der Veen, F. M. (2020). The association between sleep and panic attacks in a non-clinical sample: The role of subjective sleep quality and emotion regulation. Journal of Affective Disorders, 260, 585-592.