

# 21

Chapter

# Hypochondriasis

Do you worry about aches and pains?

Do you overreact to symptoms in your body such as feeling foggy, noticing your heart beating, numbness or tingling sensations, or being light headed?

Do you jump to the conclusion that those symptoms are signs of a fatal, progressive, or chronic illness such as cancer, multiple sclerosis, or ALS (amyotrophic lateral sclerosis, also known as Lou Gehrig's disease)?

Do you search the internet looking at symptoms and diseases for more than 20 minutes a day?

Do you go to the doctor, urgent care, or emergency room often and insist on the health care professionals running more tests?

Do you question whether the tests are accurate and whether the doctors are missing something?

If you answered "yes" to any of these questions, continue reading this chapter. Otherwise, skip to the next chapter.

People struggling with hypochondriasis catastrophize that even mild symptoms may mean a chronic or fatal illness, often despite having multiple tests all indicating a clean bill of health. There is a pattern of worrying about a condition or disease for several months, even years, and then sometimes eventually feeling quite certain that you don't have that problem. Unfortunately, though, it's not long before a new disease becomes the focus of worry, and sometimes worries about a disease you've worried about in the past return.

Unlike worry about tragedies such as accidents, being a victim of terrorism, or being robbed, for example, we do have some control over our health. In fact, we do sometimes hear of people who went to several doctors before a disease was correctly identified and treated. We also occasionally hear of more grim circumstances in which the issue is identified only after it's too late, even upon autopsy. So the concern about underusing medical care is a real one. The importance of catching medical issues early was even mentioned in Chapter 13. All these facts explain why reducing the worry associated with hypochondriasis is challenging and why some people worry about their health so much.

The good news is that, even when there is something seriously wrong, getting the right help requires problem-solving, which can be done with minimal anxiety. Tenacity, not anxiety, is the best approach when you have a persistent concerning symptom. Also good news is that there are strategies to help dismiss minor recurrent symptoms.

Most people with hypochondriasis overuse the medical system. That is, they go to doctors, urgent care, or the emergency room too much and may also use too much over-the-counter medication or request tests they don't really need. Conversely, some people who are overly worried about medical symptoms *avoid* seeking care because they are terrified of getting bad news. For the reasons stated two paragraphs back, it is recommended that you see a physician if you are having symptoms that could be the signs of a medical problem. Waiting too long to address symptoms that can be treated could lead to a self-fulfilling prophecy of a serious medical condition. In other words,

when medical problems such as multiple sclerosis, cancer, and certain infections are caught early, they are easily treated. Wait too long and the situation could be more serious.

While some symptoms are signs of a serious problem, most aches, pains, and otherwise unpleasant symptoms are idiosyncratic, benign issues that usually pass. While anxiety doesn't cause the most feared diseases like cancer and ALS, stress does affect immune function that can contribute to some disease processes. Furthermore often anxiety and worry directly cause physical symptoms. When stressed, our sympathetic nervous system activates our bodies in a way that helps us to fight and run to keep us safe in the face of danger. But when we are stressed with no place to go and nobody to fight, it can cause gastrointestinal distress, high-blood pressure, tachycardia, headaches, and skin disorders. Realizing that their symptoms are caused by stress, most people dismiss them. For others, these natural physiological responses may lead to worry that something is seriously wrong. For instance, tachycardia and palpitations may trigger worry about a heart attack or a headache may lead to worry about brain cancer. For much more information see *It's Not All in Your Head: How Worrying about Your Health Could Be Making You Sick -and What You Can Do about It* (Asmundson & Taylor, 2005).

Unless the symptom is severe and accompanied by unexpected pain, most of us typically postpone the decision to seek professional advice when we experience a new symptom. If the symptom persists for several days or gets progressively worse, we then problem-solve instead of worrying too much. Your goal is to be able to postpone worrying about most symptoms and problem-solve with minimal anxiety.

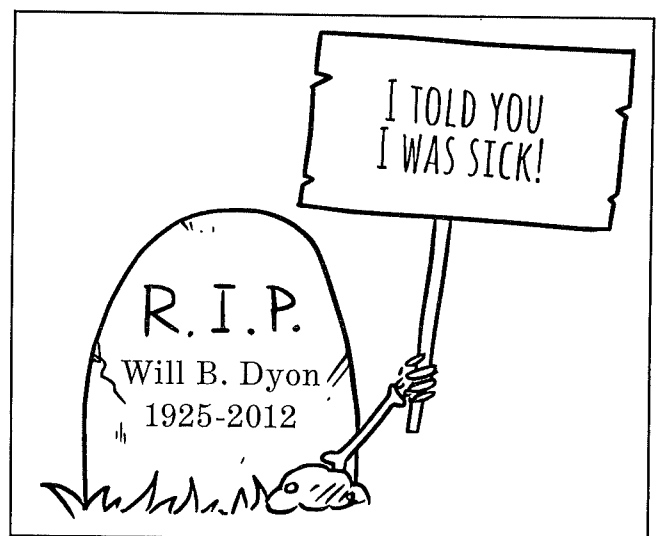
**To simplify, when we have a symptom, we have five choices:**

1. Postpone the decision to seek medical care.
2. Take over-the-counter or prescription medication.
3. Get help now. That is, go to urgent care or the emergency room.
4. Schedule an appointment with your doctor or nurse practitioner.
5. Worry.

When in doubt, postpone your concern to the next day. If you are unsuccessful, try a shorter time period. Even consider setting a timer for two hours. See pgs. 25-26 in Chapter 6, on postponing worry, for a summary of what to do. Also consider creating some B<sup>3</sup>s (see Chapter 8), such as "I've worried about this same symptom before and my doctor said it's nothing to worry about," "I've had my heart checked, and while I could get a second opinion, it is likely to only feed my worries," or "No use in worrying about something that I've decided I'm not going to seek care for at this point."

Much of the advice given in Chapter 19 (on catastrophizing) can be useful for medical concerns. Experiment by labeling your thoughts and using the "Worry Outcome Diary" (p. 99) for every instance in which you worry about a symptom.

In addition, complete the Medical History Log on the next page.



**WORKSHEET**

# Medical History Log

Complete this medical history log. Include symptoms for which you did and did not receive a diagnosis. Use the following rating scale in column four:

1 = Much better than feared    2 = Better than feared    3 = About the same as feared    4 = Worse than feared    5 = Much worse than feared

Symptoms That Have Caused Me Worry in the Past	Diagnosis or Diagnoses I Feared Were the Cause of the Symptoms	Highest Level of Anxiety About These Symptoms (1-10)	Eventual Conclusion: Description and Rating	Current Level of Anxiety About This Symptom(s) (1-10)

Looking back at each symptom or set of symptoms you worried about in the past, and thinking about the worry and the measures you took to alleviate your concerns, how would you handle each situation differently?

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What did you learn from this exercise?

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In Chapter 15, you read about crutches. Perhaps you included your health checking there. If not, consider what crutches you may have that feed your fear of medical problems. The following are quite common:

- Surf the internet compulsively.
- Reassure yourself repeatedly that you are okay only to quickly go back to the worry repeatedly.
- Seek reassurance from friends, family, and colleagues.
- Seek medical attention too much.
- Check your vitals excessively.
- Check your body in other ways (e.g., looking in the mirror or repeatedly checking any part of your body).
- Checking your children in much the same way as in the above examples.
- Any behavior that isn't mentioned that temporarily decreases your anxiety only to maintain or increase it.

If you have a bad habit of searching the internet, I suggest that you do a behavioral experiment. For one week, do not search the internet, do not look at internet news, and do not go on social media. Limit your computer activity to emails that are required for work. If you subscribe to any health-related websites, unsubscribe from all of them or at least mark their emails as junk so that they go into your junk file.

Once you have done this, a general rule of thumb is to only check two or three of the most trusted sites for health information. This is to limit the amount of time spent and to limit the potential for confusion from getting conflicting information from several different sites. It is also best to stick to those sites to which physicians, psychologists, and other health care professionals contribute. There is a plethora of misinformation on the internet and sometimes it even occurs on sites that you might think could be trusted. *Always* be wary of information on the internet. The best approach to dealing with your symptoms is to make a running list of questions and concerns and bring them to your doctor. Be careful about this, too, as there is the risk of spending too much time and energy making such a list.

Two sites that I recommend are WebMD.com and MayoClinic.org, because physicians and other health care professionals are involved in the content. If you have concerns about your children, Healthychildren.org is powered by pediatricians at the American Academy of Pediatrics. Even these sites should be used sparingly. Avoid using the links on these three sites that take you to additional sites! If you are spending more than 20 minutes per day looking up information, if you feel you have the information you need but feel compelled to continue to look, or if you're feeling increasingly anxious, it's best you stop. If you are still concerned hours later, plan to call your doctor for advice. Remember there is no substitute for the years of training and experience your doctor brings you along with their knowledge of you and your medical history. Your physician can also examine you and assess your symptoms more carefully—things an internet site cannot do. To help yourself stop or reduce your searching, think about how you'd rather be spending your time and try to switch activities.

What would you rather do than search the internet?

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