CBT for Health Anxiety & Fear of Death

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What is Health Anxiety?

- Excessive health-related fears, beliefs, and behaviors

- Health anxiety can range from mild transient worries to severe and constant anxiety/distress
Do I have Health Anxiety?

Common characteristics of Health Anxiety:

- Fears are triggered by bothersome physical symptoms, hearing about illnesses etc.
- May wax and wane in intensity
- Some people fear one illness, others fear many
- Some people go the doctor frequently, others may avoid going
- Checking bodily symptoms
- Asking for reassurance about health
- Fear of death

- Anxiety interferes with daily living
Focus of Health Worries

- Cancer, tumours
- Heart disease
- Aneurysm/Stroke
- Multiple sclerosis
- AIDs /HIV

- Pain symptoms
- Numbness, tingling, dizziness
- Cardiac symptoms
- Rash, skin discolorations
- Nausea
What is Fear of Death?

- Fear about the process of dying
- Fear of being dead/ worry about what happens after death
- Discomfort with missing out on life
- Worry about leaving loved ones behind
- Worry about death being one’s own “fault”

- Death anxiety can cause intense distress, disabling worry, reduced pleasure in life, disrupted interpersonal relationships and work life
- May try hard not to think about death and avoid all things related to death and dying
- May try to take very good care of self to postpone death
Health Anxiety and Other Problems

- Health anxiety and death anxiety cut across diagnostic categories
- Can be a part of various anxiety disorders, mood disorders
- Health anxiety in individuals with anxiety disorders:
  - 48-50% of individuals with panic disorder also report substantial health anxiety
    (Furer, Walker, & Stein, 1997, *Depression and Anxiety*; Starcevic et al., 1994)
  - 18% of individuals with GAD report high health anxiety
    (Starcevic et al., 1994)
What if I have a diagnosed medical condition?

- You may have medical issues such as diabetes, heart disease etc...
- Individuals with diagnosed medical illness may also have health anxiety
- Communication with family physician or other medical consultants is important
- Even where there is no known organic cause for the physical symptoms, important to acknowledge possibility of a significant medical illness (current or future)
Treatment of Health Anxiety and Fear of Death
Treatment Options

- Psychological treatment: CBT
- General medical management
- Pharmacological treatment
General Medical Management

- Single primary care physician
- Emphasize care rather than cure
- Refrain from over-investigation and over-treatment
- Regularly scheduled appointments independent of symptoms
- Explanation of the problem
- Recognition that symptoms are not imaginary
Medication Treatment

- Similar approach as with other types of anxiety problems
- Antidepressants, including SSRIs
- Anxiety about short-term and long-term effects of medication is a problem for some
Is CBT Helpful for Health Anxiety?

A number of studies demonstrate that:

- CBT is effective for health anxiety
- CBT is more effective than control conditions (treatment as usual, waitlist, psychological placebo, pill placebo)
- Both individual and group CBT are effective
- Treatment effects may be quite durable (gains maintained at 1 yr follow-up)
Details of CBT approach for Health Anxiety
Primary Treatment Components

- Understanding health anxiety
- Response prevention
- Exposure:
  - to illness-related situations
  - to illness worries
  - to physical symptoms
- Coping effectively with bodily symptoms
- Cognitive reappraisal
- Coping with fear of death
- Enhancing life satisfaction
- Dealing with health information
- Relapse prevention
Understanding Health Anxiety

- Understanding that the physical symptoms experienced are real
- Understanding how health anxiety may have developed and how CBT can be useful
  - Factors contributing to the development of health anxiety
- CBT model
Development of Health/Death Anxiety

- Illness-related events that may have contributed to the initial onset of the worries:
  - Family attitudes towards health
  - Childhood experiences with sickness and death
  - Difficult experiences in adulthood with sickness and death
  - Lack of experience with death and dying

- Other potential contributing factors:
  - Anxious temperament
  - Childhood adverse events
    - Abuse experiences
    - Poverty
    - Parental alcoholism
Health Anxiety: CBT Model

Internal triggers

External triggers

Illness thought

Anxiety, Fear

Safety behaviors: Checking, reassurance seeking

Bodily sensations

Temporary decrease in anxiety and fear

Interpretation of sensations as sign of serious illness

© Furer & Walker (1998)
Are you expert in noticing changes in your body?

- Body focusing experiments:
  - Swallow quickly 3x in succession
  - Focus on specific body part and search for symptoms
- Expertise at detecting even slight changes in the body
Getting reassurance from others and checking your body

What do you do?
Checking Examples

- Checking moles frequently
- Monitoring pulse regularly
- Daily breast self-examinations
- Weighing self to see if weight has decreased
- Palpating abdomen to look for lumps
- Checking bodily fluids
Reassurance-Seeking Examples

- Asking a friend or family member about symptoms
- Going to regular doctor to ask about symptoms
- Going to a walk-in clinic or ER
- Reviewing symptoms in a medical book or on the internet
- Requesting diagnostic medical tests
Effects of Checking and Reassurance-Seeking

- The immediate effect may be a reduction in anxiety
- The problem is that the decrease in anxiety is very short-lived
- May also lead to increased checking and reassurance-seeking
How to Decrease Checking and Reassurance-Seeking

- Postpone checking/reassurance-seeking to a later specific time
- Gradually decrease the frequency of checking/reassurance-seeking
- Choose not to engage in checking/reassurance-seeking

- This is called Response Prevention
Exposure Approaches
Importance of Exposure

- Many of us cope with health anxiety & fear of death by avoiding situations that cause fear or discomfort
- Facing fear is the best way to overcome anxiety
- Regular exposure practice may result in changes in thinking patterns
- Good to start this early in treatment
Exposure – the Basics

- Short and long-term effects of avoidance
- Systematic and repeated exposure on daily basis (30-60 min per day)

- Desirable for there to be some periods of high anxiety during exposure. *Experience* anxiety rather than focus on reducing anxiety symptoms.

- Importance of combining the exposure with response prevention
Exposure Strategies
(Furer & Walker, 2005, Journal of Contemporary Psychotherapy)

- Exposure to external triggers related to illness and death
  - *In vivo* exposure
  - Imaginal exposure
- Exposure to thoughts and images related to illness and death
  - *In vivo* exposure
  - Exposure script or *Illness Story*
- Exposure to feared bodily sensations
  - Engaging in activities that produce uncomfortable symptoms
  - Deliberately focusing on symptoms when they happen
Exposure homework – external triggers

Sample assignments:
- Visiting hospitals
- Going to the doctor
- Reading articles about illness and death
- Watching movies or TV programs about illness and dying
- Going to the cemetery/funeral
- Read obituaries
- Prepare will
- Write own obituary (for current age)
- Make funeral arrangements
Exposure to Illness Worries/Fear of Death

- Target fears of developing a serious illness/death & dying using written narratives
  - Create detailed narrative describing own specific worries and fears
  - Repeatedly read the story as exposure to the feared thoughts

- Draws on approaches used with GAD, OCD & PTSD
Illness Stories

- Writing an Illness Story
  - worries concerning illness and death
  - make it as real and emotional as possible
  - describe the bodily feelings and the thoughts that trouble you the most
  - write about the doubts that you experience
  - describe the catastrophic results you worry about
  - describe worries you have about the effect of this illness on your family
Coping with Problematic Body Sensations
Bodily symptoms and anxiety

- Physical symptoms can set off the anxiety cycle and they can also feed the anxiety cycle.
- Some people find that they have gotten used to the physical sensations they experience when they are anxious or stressed.
- But some people find that coping with bodily symptoms is challenging.
- Fortunately, there are things that help...
Coping with bodily symptoms

- Learning about physical symptoms that are often part of anxiety
- Accepting the reality that we all have uncomfortable body symptoms – “noisy” bodies
- Consistent practice of strategies that you find reduce your physical symptoms
- Exposure to uncomfortable body symptoms
Body symptoms which can be caused by anxiety

- Heart rate changes
- Palpitations
- Chest pain
- Chest pressure
- Temporary spike in blood pressure
- Shortness of breath
- Headaches
- Dizziness
- Lightheadedness
- Feeling faint
- Tingling of extremities
- Vision changes
- Unreal feeling

- Constipation, diarrhea
- Nausea
- Stomach cramps
- Vomiting
- Pain symptoms related to muscle tension:
  - Neck pain
  - Back pain
  - Jaw pain
  - Headaches
- Sweating
- Flushing
- Chills
- Fatigue
- and more.....
Our noisy bodies

- Body temperature changes
- Emotions cause many changes in the body
  - Muscle tension
  - Heart rate and BP changes
  - Stomach-related symptoms
- Hunger causes nausea, dizziness, headaches etc...
- Missed caffeine: headaches
- Excess caffeine: jitteriness, shaking
- Etc...
How can we deal with our uncomfortable physical symptoms?

- **Manage** the symptoms as effectively as possible
- **Accept** the symptoms as much as you can
- **Shift** your focus away from the symptoms
Manage your physical symptoms

- What has worked for you in the past in reducing your uncomfortable bodily sensations?
- Can you use these techniques more often?
  - Need to be very consistent
- What can help:
  - relaxation strategies
  - regular exercise, healthy living
  - pain medication
Relaxation

- **Formal relaxation techniques**
  - Paced breathing
  - Progressive muscle relaxation
  - Meditation

- **Informal relaxation techniques**
  - Exercise
  - Listening to music
  - Playing with your pet
  - Spending time with friends
What if I can’t get rid of my symptoms?

- Work on calmly understanding and accepting that uncomfortable physical symptoms are presently part of your life
- Let go of the struggle to avoid or eliminate the symptoms
- Go on with life despite the symptoms
- Work on shifting your focus...
Shift your focus away from the symptoms

- Focusing your attention away from your symptoms and toward the external environment can help.
  - Concentrate on the conversation you’re involved in, rather than on the pain in your chest.

- Use coping thoughts which can help you both accept your symptoms and refocus your attention.
  - “My chest is feeling really sore just now. Don’t fight it. Just let it pass. I will pay attention to the person I am talking to.”
Or we can do the opposite....

- Focus on your uncomfortable symptoms deliberately, in a planned way:
  - Be aware of your body sensations when they happen or when you face feared situations.
  - Spend 15-20 minutes calmly observing the symptoms. Describe the symptoms in detail.
  - See how they change over time.
  - Accept the feelings and don’t try to change them. They will often change as time passes if you simply observe them.
Healthy and Unhealthy Distraction

You are worried about a bad headache you have while you are in a meeting at work.

- **Healthy distraction:** Rather than pay attention to the symptoms, you pay attention to what the other people are saying and take notes to help you follow up.

- **Unhealthy distraction:** You start to daydream about the coming weekend and what you will be doing to relax. You miss a lot of the information discussed at the meeting.
Cognitive Reappraisal
Cognitive Reappraisal - the Basics

- To address:
  - Unhelpful beliefs about health and illness
  - Misinterpretations of bodily symptoms
  - Misinterpretations of health information
  - Tendency to selectively focus on information confirming health fears

- Having early focus on exposure and response prevention seems to result in significant cognitive change.

- Sometimes cognitive work needs to precede exposure work; often simultaneous.
Typical Anxious Thoughts in Health Anxiety

- What if this chest pain means I have heart disease?
- Is this symptom a sign of cancer?
- Should I go to the doctor to ask about ___ symptom?
- The doctor says I don’t need to worry about this symptom, but what if she is wrong? Doctors do make mistakes.
- What if my doctor missed something important?
- I have to eat only very healthy foods – otherwise it will be my fault if I get a disease.
- It would be devastating if I got a serious illness. I would not be able to cope.
- What would I do if my spouse/child got ill?
Negative or catastrophic thought:
These painful headaches are a sign that I have a brain tumor or aneurysm.

When does this thought tend to come to you? Trigger for this thought?
Whenever I have a headache that lasts longer than 20 minutes.

What is the probability that this negative event (e.g., serious illness) will happen?
All people, including healthy people, get headaches. I realize that brain tumors and aneurysms are pretty rare. I have had hundreds of headaches and have not ruptured an aneurysm yet. I have had these headaches for years, so if I really did have a brain tumor I would be sicker by now.

List other possible explanations for the troubling physical symptom.
Stress, tension, too much fatigue, not enough sleep, spending too much time working on the computer.

How can you cope with the uncomfortable bodily symptom? What has helped in the past? What can you try this time?
- I usually feel better if I go for a walk in the fresh air, have a drink of water, and work on relaxing the muscles in my neck and shoulders.
- I will try these first and if the headache is still a problem, I will take a pain reliever.
If you did get a serious illness, how would you cope with it?

I hope I could cope with this with some dignity. I know my wife would help me get through the treatment. My friends and relatives would help me and my family get through this too.

What are some coping thoughts you could use when this negative thought happens in the future?

(1) My headaches are annoying but I generally feel better if I go for a walk in the fresh air, have a drink of water, and work on relaxing the muscles in my neck and shoulders. These strategies do not help brain tumors but they do help tension-related headaches, so my headaches are likely related to stress.

(2) All people, including healthy people, have headaches. Most headaches are due to tension, too much caffeine, and other minor stressors.

(3) If I am not able to manage these headaches with healthy strategies and they continue to be a problem for many weeks, I can talk to my doctor about it. She will let me know if I need to be concerned about this. If I do have a serious illness I will figure out a way to handle it.
Common Beliefs about Death

- If I find out that I am going to die, I will not be able to cope with my feelings
- Dying is likely to involve terrible pain and suffering
- If I die before my children are grown, it will ruin their lives forever
- I wouldn’t be able to cope with death because I don’t have a religious faith (or a strong enough faith) to give me confidence and peace in what comes after death
More Realistic Beliefs about Death

- Many people are understandably frightened when they find out that death is approaching. They manage to cope with these emotions as time goes on and most people approach the end of life with dignity.

- People have help to deal with the illness and pain and are able to get through this with a good deal of support. Relief of pain is now a high priority in treatment of the dying.
More Realistic Beliefs about Death (2)

- Leaving my children behind will be difficult but there are other people who care about them who will help them. It is important to do the best job possible of parenting now. Part of this job is making sure that the children have others who care about them.

- People with all different types of religious beliefs, including no beliefs, cope well with death. It is valuable to consider your philosophy about life and death.
Addressing Health Anxiety: Additional Themes
Dealing with Health Information

- Health information in the media can be a trigger for health worries
- How to interpret this information
- Becoming a critical consumer of health information
- Best not to make significant lifestyle, medication or dietary changes because of a single health-related news item
Healthy living

- Regular exercise
- Healthy eating
- Reduce caffeine
- Reduce alcohol and drugs
- Regular time for fun
- Regular time for relaxation
- Enjoying the little things in life
- Building relationships with friends and family
Overcoming Fear of Death: Other Strategies
Coping with Fear of Death

1. Accepting the reality of death
   - Acceptance
   - Existential approaches
   - Exposure
   - Cognitive approaches

2. Increasing appreciation and enjoyment of life

Modifying fear of death may be a slow process
Accepting the Reality of Death

- Death is part of normal flow of life
- Death is one of the things that makes life precious
- Important to appreciate and enjoy life while you have it.
- Work on seeing the balances in life
Experiences Related to Terminal Illness (Yalom, 1980)

- Deciding what is important in life and what is not important. Not being troubled by unimportant matters.
- A sense of liberation: being able to choose not to do those things that they do not wish to do.
- An enhanced sense of living in the immediate present, rather than postponing life until retirement or some other point in the future.
- A vivid appreciation of the elemental facts of life: the changing seasons, the wind, falling leaves, last Christmas, and so forth.
- Deeper communication with loved ones than before the crisis.
- Fewer interpersonal fears, less concern about rejection, greater willingness to take risks, than before the crisis.
Staring at the Sun (Yalom, 2008)

- Existential approach in addressing fear of death
- Power of connection in overcoming fear of death
  - State of non-being after death is the same state we were in before our birth (Epicurus)
  - Concept of “rippling”
- If we are going to die, then how or why should we live?
- Fulfilling your life
- The value of regret: ‘How can you live now without building new regrets? What do you have to change in your life?’
- Waking up to mortality

The way to value life, the way to feel compassion for others, the way to love anything with greatest depth is to be aware that these experiences are destined to be lost. (p.147)
Enhancing Life Satisfaction

- Think about smaller things in life that may provide pleasure and satisfaction
- Track activities that provide sense of pleasure or satisfaction
- Need to incorporate more fun into life
- Increase mindfulness re pleasant activities
- Review short and long-term goals in life
- Homework: plan more pleasant activities on a daily basis
Living Life to the Fullest

- A short talk with a good friend
- A joke or a laugh with someone at work
- A job well done
- Interesting reading, radio, television, music, or internet activities
- A walk in the fresh air
- A visit to a park or a drive in the country
- Good food
- Spending time with a friend, a family member, a child, or a pet
- A hobby or leisure activity
Relapse Prevention
Relapse Prevention

- Prepare for inevitability of setbacks
- Identify potential triggers for setbacks
  - Change in physical symptoms
  - Facing a previously avoided illness situation
  - Serious illness
  - Death of loved one
  - Increased life stress
- Strategies for coping with setbacks
- Importance of healthy living and personal wellness
Books for the public


For the professional


