Fear of Contracting a Disease/ Illness Anxiety Disorder (Nosophobia) [1]

What You Need to Know about Nosophobia/ Illness Anxiety Disorder

“Noso” is the Greek word for disease and “phobos” for fear. Many people with nosophobia are scared of contracting cancer, heart diseases, venereal diseases, and tuberculosis. However, the current diagnosis is termed as Illness Anxiety Disorder; hence, this will be used in the following discussions.

SYMPTOMS
The onset has been observed to be during the early and middle adulthood years. The fifth edition of Diagnostic and Statistical Manual of Mental Disorders (DSM 5) defines illness anxiety disorder as:

...worry about illness, concern about pain, and bodily preoccupations. Individuals may or may not have diagnosed medical conditions. Although an individual with illness anxiety disorder and a diagnosed medical condition is likely to experience anxiety about the medical condition, the medical condition is not physiologically related to the anxiety symptoms (2013, p.232)

Since merely thinking or hearing of a certain disease causes extreme anxiety, an individual with this disorder may occasionally seek medical attention. Being exposed to disease-related information in the mass media contributes to amplifying the irrational fear. They are likely to consult alternative therapists, local healers, and other non-medical/scientific treatments. In addition, their persistent anxiety makes them preoccupied with suspicions and precautions which leaves less or no time for the other aspects of their lives. Hence, another chief indicator is depression as the affected individuals become imprisoned in their anxiety.

COMORBIDITY
Individuals with schizophrenia, obsessive compulsive disorders, clinical depression, and bipolar disorders have higher risks in developing the fear of contracting an illness due to an amygdale (responsible for emotions, survival instincts, and memory) or pituitary (regulates endocrine glands) linked disorder.

CAUSES
The development of illness anxiety disorder is uncertain. Several factors have been cited to contribute to its progression. It may be precipitated by a traumatic experience such as a history of childhood abuse or a grave health threat to the individual's life. Overprotective
caregivers or parents' extreme worries on trivial health issues may also contribute to an individual's illogical concern regarding illnesses.

**TREATMENT**

**Cognitive Behavior Therapy (CBT)**
This is one of the popular therapies which involves discovering specific fear triggers and mustering self-confidence. Generally, the psychiatrist changes the patient's perception of illnesses by bolstering his ability to conquer his irrational thoughts. Effective techniques in regaining emotional control and halting panic responses are taught. This kind of therapy gives prime importance to collaboration in achieving cognitive, behavioral, and emotional regulations.

**Systematic Desensitization**
Joseph Wolpe introduced systematic desensitization in 1958. This entails relaxation techniques in a controlled environment. Wolpe's general procedures involve specifying the individual's anxiety level, engaging in breathing exercises, and visualizing threatening stimuli. The goal is to help the client face the actual source of his fear with much more self-assurance.

**Medications**
Benzodiazepines and other anti-anxiety drugs as well as beta-blockers and anti-depressants may be prescribed in facilitating the treatment of various phobias and other anxiety disorders. These kinds of drugs can help balance neurotransmitters which can lessen panic attacks as well as aid in facilitating coping techniques.

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