

Phobias

A phobia is an irrational fear of a specific situation, activity or object. The phobia compels the sufferer to avoid whatever is feared because with it comes a number of troubling symptoms such as:

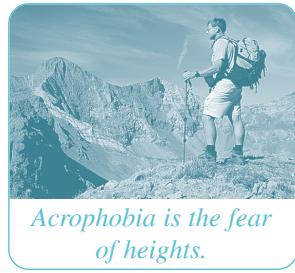
- Anxiety
- Rapid heartbeat
- Sweating
- Hot or cold flashes
- Choking, smothering feelings
- Shaking
- Dizziness, faintness
- The need to flee the situation
- Panic attack, sometimes (See “Panic Attacks” at www.HealthyLearn.com.)

Children may express their anxiety by:

- Crying
- Clinging
- Tantrums
- Freezing in place

Phobias – 3 Basic Types

- **Specific Phobias.** These are sometimes called simple phobias. The irrational fear is of specific objects, such as snakes, dogs, closed spaces or heights. (See box in next column for some common phobias and their uncommon names.)



Phobia Name:	Fear of:
Acrophobia	Heights
Arachneophobia	Spiders
Asterophobia	Thunder
Ceraunophobia	Lightning
Claustrophobia	Enclosed spaces
Hydrophobia	Water
Mysophobia	Dirt, Germs
Ophidiophobia	Snakes
Nyctophobia	Darkness
Pyrophobia	Fire
Xenophobia	Foreigners, Strangers
Zoophobia	Animals

Most of the time, simple phobias develop during childhood and often go away with time. Those that continue into adulthood rarely go away without treatment.

- **Social Phobia.** The irrational fear is of being embarrassed or humiliated in public. Examples of situations leading to this include:

- Public speaking (this is the most common social phobia)
- Stage fright
- Eating in public
- Talking to co-workers
- Asking someone out on a date



Phobias, *Continued*

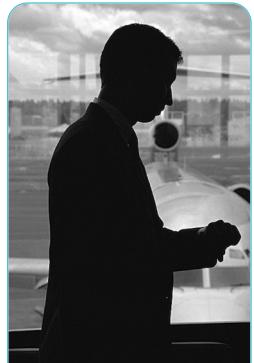
- **Agoraphobia.** The irrational fear is of being alone in public places from which the person:
 - Feels trapped with no way to escape (or thinks it would be difficult to escape)
 - Would be very embarrassed or helpless when phobic symptoms occur
 - Fears being totally unable to take care of himself or herself if help was not around

Agoraphobia can occur with or without panic disorder. (See “Panic Attacks” at www.HealthyLearn.com.) It most often comes after having panic attacks because the sufferer avoids the places where panic attacks occurred. He or she fears that something about the location caused the panic attack. The fear of having another panic attack can result in avoiding going out in public. In severe cases, persons with agoraphobia don’t leave their home at all.

Treatment

- **Behavior therapy.** One type is called exposure therapy. This type exposes the person to the feared situation or object in one of two ways:
 - **Gradual exposure.** This is called “Systematic Desensitization.” A therapist works with the person in gradual steps. First the person learns relaxation methods to deal with the physical responses to his or her phobia. Second, the person imagines the source of the phobia. Next, the person looks at pictures of the feared object or ones that depict the feared situation. Finally, the person is gradually exposed to the situation or feared object.

- **Direct exposure.** This is known as “Flooding.” The person is exposed to the feared object or situation all at once (in the presence of a therapist). The person stays in that situation until his or her anxiety is markedly less than its previous level. Sessions doing this are repeated until the person can handle the phobic situation alone.



Treatment depends on the type of phobia and how much it keeps a person from normal life activities.

- **Eye Movement Desensitization and Reprocessing (EMDR).** This treatment method integrates elements of many effective psychotherapies in combination with eye movements or other forms of rhythmical stimulation. It stimulates the brain’s information processing system to help clients identify, neutralize, adapt to or resolve upsetting memories of a traumatic event.
- **Group therapy and/or self-help support group therapy** such as Agoraphobics in Motion (A.I.M.).
- **Medication.** Types include certain anti-depressants, anti-anxiety medicines, tranquilizers and ones known as beta-blockers. These medicines block or reduce the panic symptoms that come with phobic situations. In so doing, they help a person confront the feared situation when they might have been too afraid to do so otherwise.

Phobias, *Continued*

Medications are especially helpful for persons with agoraphobia with panic disorder. Certain beta-blockers can be useful for persons who suffer from stage fright.

Questions to Ask

Do you have all of these problems?

- Panic Disorder (see at www.HealthyLearn.com)
- Anxiety about being in places or situations from which escape might be difficult or embarrassing or in which you could not get help if you had a panic attack
- Avoidance of being alone in places outside of the home, such as ones that involve:
 - Being in a crowd
 - Standing in a line
 - Being on a bridge
 - Traveling in a car, bus or train

NO

Did you answer "yes" to parts two and three of the first question, but you don't have panic disorder or get panic attacks?

NO



Are there certain objects or situations which cause you to feel intense fear or terror to the point that you lose control of yourself?

NO

Do you avoid certain situations, objects, persons or places to the point that doing so is interfering with tasks you want to get done?

NO



Self-Help

The following tips are ways to deal with phobias that do not disrupt your daily life. They may also be used with or after professional treatment.

- List your irrational fears. Writing them down helps you to identify them. Try to figure out why you have the fears, what you think they mean, what they might symbolize and what you can do to deal with them. Doing these things can give you some control over your fears.



Flowchart continued in next column

Phobias, *Continued*

- Learn and practice relaxation techniques. These allow you to feel more comfortable and show that you can control the physical symptoms which result from your phobia. They also help you to overcome your phobia by allowing you to remain in the situation long enough to realize that you are not in any danger. Two important relaxation techniques to use are:
 - **Controlled Breathing.** When you panic, you over-breathe or hyperventilate which makes you dizzy. This causes your heart to race and makes you feel weak and tremble. Take a few deep breaths and hold each one to the count of 3, then exhale slowly to the count of 3. This will help restore normal breathing, slow your pulse and remedy your dizziness and shakiness.
 - **Tension Control.** When you panic, you tense your muscles making them feel hard and uncomfortable. Concentrate on each muscle group (arms, legs, neck, shoulders) and consciously relax them until you feel the tension subside. Practice this technique until you can relax your muscles simply by “thinking” about relaxing them.
- If you have a fear of speaking in public, enroll in a public speaking course, such as Dale Carnegie or Toastmasters.
- The “Now Awareness Technique” described at www.HealthyLearn.com can be used to overcome a phobic reaction.

- If you are afraid of flying, take a course designed to help people conquer this fear.
- Also, see “Self-Help: Ways to deal with panic that has limited symptoms and duration” at www.HealthyLearn.com.
- See a counselor if Self-Help do not help you deal with your phobia on your own.

What You Can Do for a Friend or Relative

- Be supportive. Take their phobia seriously. A phobic person suffers an intense fear of something you most likely find harmless. Telling them they are being “silly” or “childish” will not help them. It will only serve to increase their feelings of anxiety and alienation.
- Do not attempt “flooding” on your friend or relative. Forcing your friend or relative into a direct, sudden confrontation with their feared object, person, situation, etc. will only intensify their panic and physical distress. Only a trained professional should use this method.



Take the time to listen to your friend's concerns.