Tackling Four Big Health Phobias
How to avoid or overcome our biggest medical fears

By Tara A. Lewis  August 12, 2010

Even those who have access to health care don’t always take advantage of it, because at times dread and unease prevent people from seeking important medical attention. With all the talk in the media and information on the Internet about disease and health risks, it’s hard not to be anxious about staying healthy. But being aware and actively involved in safeguarding your own health can help ease fears and avoid risks.

Health fears can span a continuum of anxiety and fear, says Jessie Gruman, founder and president of the Center for Advancing Health, a nonprofit in Washington, D.C. “If you’re paying attention to the news, getting health care is something to be worried about; it’s not hysterical, it’s not irrational,” she says. “You need to be vigilant and not frightened.”

We’ve rounded up some common fears, and remedies that can allay them and help make your next visit to the dentist or doctor safer and more comfortable.

Fear of Hospitals
Nosocomephobia is the official term for a crippling fear of hospitals. President Richard Nixon was known to fear going into hospitals, concerned he would not get out alive. Even plenty of people who don’t meet the clinical definition are uncomfortable at the thought of a night in the ER or even visiting a sick relative.

Solutions:

(1) Avoid Infection: The Centers for Disease Control estimates that in American hospitals there are 1.7 million infections and roughly 99,000 deaths per year. Both numbers are likely much larger, says Betsy McCaughey, chairman and founder of the Committee to Reduce Infection Deaths (RID) and former lieutenant governor of New York. “No one is immune from infection,” she says, noting that mothers and professional basketball players visiting the hospital for surgery are all equally at risk. Luckily, there are steps you can take to make your, or your family member’s, next stay in a hospital much safer. RID recommends 15 ways to prevent hospital infections. Their recommendations range from asking to be kept warm during surgery to finding ways to avoid germs when having a Caesarean section.

(2) Do Your Homework: There are many sites that offer data about and rankings of hospitals and doctors. Combining your own research with the advice of your doctors, friends, and family will likely help you find the right hospital and doctor. Here are a few places to get started.
Hospital Guides: HealthGrades offers a comprehensive search of hospitals by state, city, and category. Guides list specialists, best hospitals, safest hospitals, and much more. In 2010, they created a list of the 50 best hospitals. Patients can search the Web site by location and find award-winning hospitals in their area. California residents can scout out the best of 240 hospitals surveyed through an online search that ranks hospitals based on quality and the speed with which they treat patients. The Department of Health and Human Services also provides several resource-finding tools including one that searches hospitals by location and provides data about their quality and performance based on patient surveys and rates of readmission. Doctorfinder by the American Medical Association helps you find doctors and their credentials by name and location or specialty and location, but does not offer reviews. The Prepared Patient Forum run by the Center for Advancing Health, is another useful portal to reviews of doctors and hospitals.

More Sources: Donna O’Rourke of The Street offers advice on how to find a good hospital and useful Web sites that help you find them. Forbes has a detailed story about how HealthGrades ranks hospitals, a breakdown of its rankings, and what they mean. Every year U.S. News & World Report ranks the best hospitals, including specialty rankings and children’s-hospital rankings.

Fear of the Dentist
In news that will surprise no one, about 50 percent of people avoid the dentist out of fear, says Clara Spatafore, a private practitioner and president of the American Association of Endodontists (who are specialists in root canals and diagnosing dental pains). But while images of Laurence Olivier’s Nazi dentist in Marathon Man may still terrify some people, the fact is, oral care has improved with the times. These days most root canals are painless, Spatafore says.

Solutions:

(1) Start Early in Life: “Parents should start their kids going to the dentist at age 2,” says Spatafore. Spending time with pediatric dentists can be a fun experience and could minimize the kind of negative experiences that can cause a person to develop fear of the dentist later in life.

(2) See an Endodontist: As specialists in diagnosing pain, endodontists—to whom dentists often refer patients—can better explain your ailment and help you find more precise treatment, Spatafore says.

(3) Distract Yourself: Spatafore recommends going to meet your dentist or dental hygienist before a problem arises, so you can jointly decide whether anti-anxiety medication, hypnosis, or IV sedation could help take your mind off unpleasant sounds. Nitrous oxide (or laughing gas) can be combined with other forms of distraction and relaxation techniques to divert your attention away from your visit or the sound of the drill, says Peter Milgrom, a specialist in treating patients with dental fears and professor of dental public-health sciences and pediatric dentistry at the University of Washington School of Dentistry.

(4) Avoid Fearsome Instruments: These include such things as the drill, scalpel, and, for those uncomfortable with needles, even injections of anesthesia. Hard-tissue lasers eliminate tooth
decay, and soft-tissue lasers can help treat gum infection, says Dr. William Tennant, a dentist whose practice in Berkeley, Calif., includes laser dentistry. The lasers emit a “pitter-patter” sound, says Tennant, which may be comforting to those unnerved by typical drills. Tennant says many of his patients, some of whom display anxiety in the dentist’s office, prefer the lasers over traditional techniques, when possible.

**Fear of Anesthesia**

One in four people may put off surgery because of a lack of understanding and or “apprehension” about anesthesia, the American Society of Anesthesiologists reports. The recent death of superstar Michael Jackson, who used a powerful anesthetic as a sleep aid, does not help. The truth is that, like dentistry, anesthesia is much safer than in the past: over the last 25 years, the number of deaths has declined from one in 10,000 people administered anesthetics to one in 200,000 to 300,000. “A person is about 40 times more likely to be struck by lightning than he or she is to die from anesthesia-related complications,” says John Dombrowski, a practicing anesthesiologist and member of the American Society of Anesthesiologists.

Solutions:

1. Be Honest: Telling the anesthesiologist about your past experiences with anesthesia—good and bad—and your family’s history with it will not only help make your next experience much more comfortable, but also safer. If the anesthesiologist knows what to watch out for, he or she can prepare. For example: giving you medication to control pain before you are anesthetized and undergo surgery. And being honest about what medications and drugs you take, including herbal supplements like ginkgo and over-the-counter drugs like aspirin, which may all lead to increased bleeding, will help the anesthesiologist avoid complications like blood loss, says Dombrowski. Preemptive pain control and devising a treatment plan with your anesthesiologist is the best way to prevent common side effects like nausea, vomiting, an upset stomach, and poor pain control as a result of anesthesia, says Dombrowski.

2. Be Your Own Best Advocate: A patient can control his or her risks of complications like heart attack, stroke, and blood loss while in surgery and anesthetized by following a couple of tips.
   Stop smoking. If you stop smoking several weeks before your surgery, you can improve your lung function and “your red blood cells have a better ability to hold onto oxygen,” says Dombrowski. Manage stress. Controlling your anxiety level before surgery will help the procedure along and make you feel much better. Ask questions about what’s making you nervous and ask to be walked through the procedure.

3. Lower Your Blood Pressure: Create a plan with your doctor and anesthesiologist to lower your blood pressure a few weeks before surgery. Dombrowski says hypertension and “tremendous swings in blood pressure” may put you at a greater risk of experiencing blood loss and needing a blood transfusion, as well as having a stroke or heart attack.

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Fear of Needles
Twenty-one percent of Americans polled by Gallup in 2001 were afraid of needles and getting shots. Unfortunately, needles are an important part of health care and avoiding them can have serious consequences. Luckily, if the sight of a needle makes you squirm, there are ways to manage that fear.

Solutions:

(1) Consider High-Tech Options: A technology called VeinViewer Vision by Lumitex Corp. uses a near-infrared light to reveal the hemoglobin in blood and project a real-time map of a patient’s veins on his or skin. The technology helps reduce the number of needle pricks needed to access a person’s veins—a plus for people who are afraid of needles or for whom finding veins is difficult.

People in this category can also look forward to the age of microneedles: the end of painful needle pricks is nearly here. A team of researchers at Emory University and engineers at the Georgia Institute of Technology has developed a painless way to administer a vaccine through “microneedles”—but so far only to mice. Under the procedure, hundreds of tiny needles administer a freeze-dried vaccine, with the entire patch dissolving directly into the skin. The technology may be ready for human use within a few years.

(2) Manage Pain: This can help many patients overcome their fear of needles, writes Anna Taddio, a pharmacist, professor, and writer for Canada’s Globe and Mail newspaper. There are physical, psychological, and pharmacological ways to reduce a person’s pain, such as rubbing the site of the needle prick before and/or after the procedure and sitting up while a needle is administered, Taddio writes.