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Commentary: Thoughts on Cyberchondria – A New Challenge for Healthcare Providers

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Excessive use of the Internet is a behavioral addiction that may result in cyberchondria, which is an increased anxiety following online health-related searches. Studies have shown individuals with high illness anxiety feel worse after online symptom-checking, but those with low illness anxiety experience relief.¹ Although a convenient and easily accessible mode of obtaining information, medical sites may not bestow reassurance or provide an accurate diagnosis based on symptomatology.² Using online symptom checkers is unreliable in pin-pointing specific causes of problems or the need to seek immediate medical care.³ Because individuals with moderate to high levels of illness anxiety exacerbate that anxiety during and after searching, this behavior may be detrimental to their health. This emerging threat to health posed by the internet requires vigilance.⁴ In addition to increasing anxiety, the addiction of using the Internet to provide re-assurance on medical matters may cause loss of time as well as increased testing during visits to acute care settings or emergency rooms. It may lead to increased levels of psychological distress, worry, and unnecessary medical expenses. A psychometrically sound measure has been developed to quantify these outcomes.⁵

There is a relationship between behavioral addiction such as excessive internet use with psychiatric disorders, although patients with obsessive-compulsive symptoms do not share associations with cyberchondria.^{6,7} Anxious patients who read a list of possible diagnoses related to their symptoms will focus on the most consequential possibility, become fixated and fearful, and present to healthcare providers demanding specific examinations. The cyberhondria severity scale can be used by clinicians to better understand the effect of this problem on their patients by measuring levels of compulsion, distress, excessiveness, need for reassurance, and mistrust of medical professionals.^{8,9}

I have been an emergency medicine physician for many years and have now seen a number of patients affected by cyberchondria. Several stated concerns about appendicitis following internet searches and insisted on undergoing CT Scans which were clinically unwarranted. Another patient with weeks of neck pain was convinced he had meningitis, a belief prompted by an Internet search. A careful history and examination with discussion re-assured him. On the other hand, one gentleman who investigated his symptoms using a medical site concluded he might have appendicitis, which indeed proved to be the case.

There is definitely a relationship between cyberchondria, anxiety sensitivity, and intolerance of uncertainty. There remains some doubt about the direction of causality. Research is needed to determine if high levels of anxiety regarding illness lead to repeated online health searches or if constant seeking of health information online results in heightened health anxiety. Regardless of causality, cyberchondria as a by-product of multiple online searches with increased visits to healthcare facilities and demands to conduct procedures may lead to detrimental health outcomes.

The challenge for healthcare providers will be to weigh facts rationally, calm fears with empathetic language, and proceed with needed examinations when appropriate. The use of the Internet by patients presents a new demand on healthcare providers to adroitly re-assure patients with cyberchondria, while at the same time avoiding unneeded and possibly risky procedures even if demanded vociferously. Respectful conversations are requisite to diminish worries as are concomitant efforts to clarify excessive use of the Internet may be informative but also anxiety-provoking and destructive. The probabilities of diagnoses will require intricate explanations in addition to detailing that all procedures have risks and benefits and may, in fact, lead to severe negative

consequences. Even common tests such as CT Scans with intravenous contrast may lead to kidney damage or allergic reactions. It may be expedient to perform examinations at the insistence of patients, but all responsible healthcare providers should curtail this tempting pathway using their clinical acumen.

We must acknowledge and accept this new reality which may be harmful as well as challenging. The old fashioned patient - neighborhood doctor relationship which usually developed over years of trust and interaction has been replaced by an anonymous computer screen demanding clicks on appropriate links.

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