

# EMOTIONAL WELLNESS MATTERS

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**S**tress happens when we perceive an event as disturbing or threatening. Our primitive ancestors experienced stress when they had to fight off wild animals, invaders, adverse natural events, and other threats to their survival. These days we are more likely to feel the anxiety that emerges from stress when we face overwhelming responsibilities at work or home, experience loneliness, rejection, or the fear of losing things that are important to us, such as our jobs or friends. When we are exposed to such events, we experience what has been called the **fight or flight response**. To prepare for fighting or fleeing, the body increases its heart rate and blood pressure. This sends more blood to our heart and muscles, and our respiration rate increases. We become vigilant and tense. Our bodies end up on full alert – and this allows us to take action. When these anxiety-inducing conditions continue over a long period of time, however, and have a significant impact on how we live, we may begin to suffer from one of the **anxiety disorders**.

Research indicates that anxiety disorders are the leading emotional health disorder for women and are second only to substance abuse among men. Within any given year, it has been estimated that fifteen percent of the population suffers from one of the anxiety disorders – yet only a small portion of those who suffer receive treatment. Fortunately, treatment is available and generally effective.

Anxiety can be helpful when it prompts us to take action to solve a problem. We can use our anxiety as a clue, in fact, that there is a problem, and that we need to confront it. Public speakers, athletes, and entertainers have long

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*Dedicated to the goal of improving the life and mental health of all those we serve through quality treatment programs, personal empowerment and ongoing support.*

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known that anxiety can motivate them to perform much better. When we don't recognize our anxious feelings, or don't have the tools to deal with them, we may continue to expose ourselves to the causes of the anxiety – and this leads to more problems.

Prolonged anxiety is demanding on our bodies and our lives in general. The constant state of “fight or flight” may cause heart palpitations, dizziness, trembling or shaking, increased blood pressure, sweating, choking, high stomach acidity, nausea, chest discomfort, or muscle spasms. We may feel detached or out of touch with reality or think we are dying or going crazy. There is evidence that prolonged anxiety can lead to heart disease and a compromised immune system. It depletes our energy and interferes with concentration. We may become abrupt with other people and engage in emotional outbursts or even physical violence. Our relationships and job security may be jeopardized. People who experience prolonged anxiety are more prone to self-destructive behaviors, such as drug and alcohol abuse, since they may turn to these substances as a form of self-medication.

## The Most Common Anxiety Disorders

An anxiety disorder lasts longer than normal anxiety, is more intense, and can lead to fears that interfere with the ability to function in daily life. Here are some of the more common types of anxiety disorders :

- ◆ *Generalized anxiety disorder* occurs when a person has endured, for at least six months, a state of excessive worry, feeling on edge continually, sleep difficulty, and finding it hard to experience pleasure and relaxation. The symptoms include restlessness, irritability, difficulty concentrating, fatigue, and muscle tension. This condition is not accompanied by phobias, obsessions, or panic attacks.
- ◆ *Agoraphobia* is the most prevalent of the anxiety disorders. People who suffer from agoraphobia are afraid of finding themselves in situations where escape would be difficult or help unavailable. They may suffer from panic disorders in certain situations and then, over time, develop a fear of finding themselves in these situations. Common situations include using public transportation (subways, airplanes, trains), being at home alone, crowded public places (such as restaurants, grocery stores, etc.), and enclosed or confined places such as tunnels, bridges, or classrooms.
- ◆ *Post-Traumatic Stress Disorder* can happen if a person has been through a serious, life-threatening event – such as a natural disaster, war conditions, a terrorist act, a car or plane crash, rape, assault, or other violent crime. Those with PTSD may, for months or years afterward, experience repetitive thoughts about the event (with an attempt to avoid thinking about it), nightmares, emotional numbness, feelings of detachment, flashbacks, an attempt to avoid activities associated with the event, a loss of interest in pleasurable activities, and other symptoms of increased anxiety. Effective techniques are available for dealing with PTSD.
- ◆ *Obsessive-Compulsive Disorder* happens when stress or chaos in one's world causes a person to think and worry repetitively about something (these are called *obsessions*) or else to engage in repetitive behaviors, like hand-washing or checking on things excessively (these are called *compulsions*). Obsessions are recognized by the sufferer as irrational, but they continue to intrude in the person's thoughts for extended periods of time. Examples of obsessions include images of violence or doing violence to somebody else, as well as thoughts about leaving the lights on or leaving the door unlocked. Compulsions are behaviors that are performed to reduce the anxiety of the obsessions. Examples include excessive hand washing, checking the lights or the stove time and time again, or ritualistic behavior such as counting steps while walking.
- ◆ *Social Phobia* involves fear of embarrassment in situations where others scrutinize or evaluate someone's behavior. This usually causes the sufferer to want to avoid these situations, although many simply endure the anxiety associated with these experiences. The most common social phobia is speaking in public – in fact, surveys indicate that some people have a greater fear of public speaking than of death! Other forms of this phobia include fear of writing in front of others, fear of crowds, test-taking phobia, fear of spilling food or choking in restaurants, fear of blushing in public, or fear of using public restrooms.
- ◆ *Phobias* are intense fears and avoidances that occur when a person is exposed to a certain type of situation. These fears are specific to the sufferer, usually irrational, and are sometimes unexplainable. Common examples include airplane phobia (fear of flying), elevator phobia, fear of thunder and lightning, animal

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phobia, acrophobia (fear of heights), doctor or dentist phobia, blood injury phobia, and illness phobia.

◆ *Panic Attacks* are described on the back page.

## Taking Charge of Anxiety

Those who deal with anxiety in a positive way usually have:

- a sense of *self-determination*
- a feeling of *involvement in life's experiences*, and
- an ability to change negative into *positive thinking*.

◆ *Self-determination* refers to a personal ability to control or adapt to the events of everyday living. A great deal of anxiety is perpetuated by how we think about ourselves and even anxiety itself. Is the anxiety in control of us, or can we learn to control the anxiety? Rather than seeing ourselves as helpless in trying to overcome obstacles, we can begin to define ourselves as problem-solvers. We can remember specific times when we have been successful in solving problems and then define ourselves in those terms. We can learn to trust that we will have success in meeting life's difficulties. When we take this approach, we begin to face problematic situations as challenges which, when resolved, can bring new and exciting opportunities into our lives.

◆ *Involvement* means opening ourselves up to the world around us and defining ourselves as active participants in life. It means letting friends and family members into our personal lives and sharing our private experiences with others who can be trusted. Cultivating a social network serves us well when we are dealing with anxiety-provoking situations. Talking our way through a crisis in the presence of a supportive listener, rather than holding it in alone, is one of our best ways of gaining helpful feedback, putting the situation into perspective, and sensing that we are not alone. When we lack involvement with others, we often feel vulnerable and may wonder whether we have the resources to cope with anxiety.

An *ability to define things positively* is one of the main attributes of those who deal well with anxiety. The life process is one of loss and gain – it's as natural as night and day. When we trust that our losses will give rise to new gains and life experiences, the anxiety and worry associated with loss need not be devastating. For example, the loss of a job can open

the door to more satisfying employment and the opportunity for more fulfilling life experiences. The clue is to change our negative thoughts about situations into more positive thoughts – and positive feelings will usually follow a change in *thinking*. For example, if a close friend moves away, rather than thinking negatively about how lonely and devastated you will feel, think about the good memories you will always have, how your friendship will leave a positive legacy that will always touch your life, how you can still keep in touch and visit, and how you can now spend your time in new and positive pursuits. There really is no need for overwhelming anxiety in this situation. **We can choose to move toward the open doors of life rather than knocking on closed ones.**

A professional therapist uses many techniques for the treatment of anxiety – talking, reframing the way we see things, prioritizing, learning to relax our bodies, finding peace within ourselves – and the list goes on.

The clue to handling anxiety well is to acquire the skills we need to feel empowered. This requires a good, honest exploration into our lives. We need to explore the strengths that we already have for coping with stress, as well as to learn new skills. A professional therapist has a number of specific techniques for the treatment of anxiety, as well as overall life strategy plans for dealing with these problems and other life experiences. We need to be able both to comfort ourselves and to let others nurture us as well. All of us can learn, with some healthy exploration, to manage anxiety successfully.



### Book Recommendation:

Bourne, Edmond J.  
*The Anxiety and Phobia Workbook*  
Fifth Edition. New Harbinger Publications  
432 pages, \$21.95, 2011  
ISBN 978-1572248915

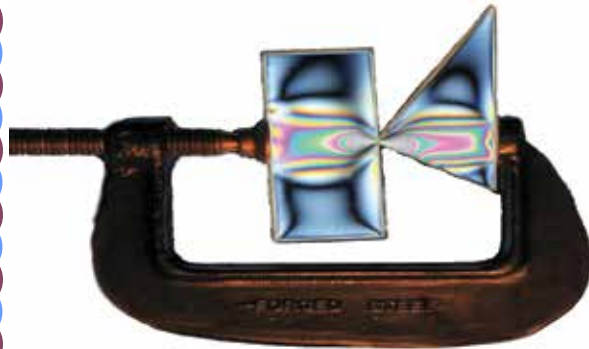
## What About Panic Attacks?

One of the most debilitating manifestations of anxiety is the **panic attack**. These dramatic episodes of anxiety seem to come out of the blue and happen even when there is no real danger. They are usually intense for a few minutes and then subside. The sufferer may experience chest pains, the feeling of smothering, dizziness, heart pounding, depersonalization, hot and cold flashes, sweating, numbness, or nausea. These symptoms may be accompanied by fears of dying, going crazy, and losing control. Those who experience panic attacks often live in fear of their next attack, and this may prevent them from leaving the house, being alone or driving. Panic attacks are not triggered by a specific phobia.

One of the factors that perpetuates panic attacks is the fear of having another one. The perception that a panic attack is coming on can magnify an awareness of symptoms and then the person begins to tense up and harbor thoughts of doom – just the conditions that drive a panic attack.

If you feel a panic attack coming on, it is helpful just to let it happen, as uncomfortable as this may seem. As is true of any phobia, you have to expose yourself to the feared situation in order for the fear to decrease over time. If you don't tense up, the symp-

toms will generally subside within a few minutes. Tensing up will perpetuate the episode. You may feel faint, but you won't really faint (blood is going to your muscles as you tense up and not to your brain, and this may bring on the sensation of fainting – but your blood pressure and heart rate have increased, so you're actually less likely to faint). During a panic attack, try to rechannel your thoughts. Challenge your negative thinking (you are not having a heart attack; you will not suffocate; you are not going crazy; you will not die). Trust that this will end soon.



Tell yourself the following – ***“Well, here it is again. Let me watch my body respond to this, just like I’ve done before. I will survive this and I can handle it. This may be unpleasant, but it’s only anxiety and it will pass. Let me flow through this.”***

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