

Patient information from BMJ

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Phobias

If you have a phobia about something it means you are scared or anxious when faced with it, or when you think about it. People can have phobias about just about anything. But the most common ones are about certain animals, small spaces, or needles.

Treatment for phobias usually works well. You can use our information to talk to your doctor about getting the help you need.

What are phobias?

Phobias are common.

- About 10 in 100 people have a phobia at some point in their lives.
- Phobias are more common in women than in men.
- Phobias are most common when people are in their teenage years, and less common in children and as people get older.
- Many people have more than one phobia.

Having a phobia means having intense fear about certain things or situations. This can either be when you are face to face with them, or just when you expect to be.

Most phobias don't cause too many problems most of the time: for example, a common phobia is fear of snakes. But snakes are easy to avoid for most people. But some phobias can disrupt your daily life and make you scared to do simple things.

Common phobias include:

- some animals (usually dogs, snakes, spiders, and insects)
- flying
- enclosed spaces (claustrophobia)
- heights
- storms
- the dark, and

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- needles.

What are the symptoms?

The symptoms of a phobia usually begin during mid to late childhood, but they can develop at any age. Some people can recall a specific event that triggered the start of their phobia, but many can't.

Phobia symptoms might seem obvious. But it is helpful to look at them in some detail, because they are different from a normal level of fear or anxiety.

For example, most people don't really like spiders and wouldn't want to handle them. But it doesn't bother them most of the time and it doesn't interfere with their lives.

Having a phobia is different. It can cause severe anxiety and stress that affects your quality of life.

Phobia symptoms include:

- severe anxiety or panic when you're faced with the thing you have a phobia about, or when you know you are about to be faced with it
- losing sleep or getting depressed because of your phobia
- avoiding any situation where you think you might come face to face with the thing you have a phobia about
- using alcohol or drugs to help calm your nerves or reduce anxiety
- fainting when you're faced with what you have a phobia about. For example, a lot of people with a needle phobia faint when they have to have an injection.

What treatments work?

Therapy

The main treatment for phobias is a type of psychotherapy ('talking treatment') called cognitive behaviour therapy, or CBT for short.

The aims of CBT are to:

- ease your anxiety
- help you get to the point where you no longer need to avoid what scares you
- reduce the negative effect that your phobia has on your life.

CBT works well for most people. But it depends on you being willing to work with your therapist to get the most out of your therapy.

It's possible that CBT won't be easily available in your area, or that it is not available straight away. So you might have to wait a while for treatment.

With CBT you have one or more sessions with a therapist. He or she will try to help you deal with your phobia using various methods, including:

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- helping you to learn about phobias
- helping you to learn about what you are afraid of: it's easier to not be scared of something when you know a lot about it
- challenging negative ways of thinking
- gradually facing the thing that you fear over time (you might hear this called 'graduated exposure') in a safe and controlled way, and
- suggesting ways to help you relax.

Graduated exposure

The idea of graduated exposure might sound scary to begin with, because it involves facing your fear. But it is one of the most important and useful parts of CBT for phobias. And it is done slowly, in a controlled and safe way.

For example, if you have a phobia about spiders, the therapy might start with you and your therapist just talking about spiders. The next step might be to briefly look at a picture of a spider.

You might then start to look at pictures for longer, then finally look at a spider in a jar, or even let one crawl on your hand.

Graduated exposure therapy can be done with a therapist. But it can also be done online, with computer-based therapy. Some phobia treatments can also now be done using virtual reality.

Needles and fainting

Many people with a needle phobia faint when they need to have an injection. A technique called **applied tension therapy** can help you not to faint.

It involves repeatedly tensing the muscles in your arms, abdomen (tummy), and legs. This increases your blood pressure so that you're less likely to faint. After you have practised this technique for a week or so, you can use it just before you have an injection.

Your doctor can give you more detailed advice on how and when to do it.

Medicines

Medicines are not generally useful for treating phobias. But there are a few situations in which they might be used.

- Anti-anxiety medicines might be used to help people relax in the short term - for example, during some stressful medical procedures - but they probably don't help in the long term.
- Some people might also be prescribed antidepressants if their phobia causes them depression.
- Some people might need medications to help them sleep if their phobia causes them insomnia.

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Like all medicines, the types sometimes prescribed for phobias can cause side effects. Your doctor should discuss these with you. If you get side effects, talk to your doctor. You might be able to change medications.

Phobias in children

It's common for children to be scared of things. For example, many children are afraid of the dark, or of some animals. But childhood fears tend to fade with time and don't usually turn into phobias.

When children do develop phobias, the treatment is similar to that for adults. But therapy sessions can also involve the child's parents. You can talk to your doctor about how treatment will work for your child.

What will happen?

You might decide that you can live with your phobias without treatment. But for some people, leaving their phobias untreated can lead to depression and severe anxiety.

Treatment for phobias works well for most people and can make a big difference to people's lives.

There is other support available, too. For example, you can find help online, through support groups and people who are happy to share their experiences of phobias and dealing with them.

Your doctor might be able to help you find support in your area.

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