CONDITION

Illness anxiety disorder

Illness anxiety disorder causes persistent fear of serious illness despite little medical evidence of disease.

WHAT IT IS
Persistent fear of having or developing serious illness

BODY SYSTEM
Mental health and nervous system

MAIN SYMPTOMS
Illness fears, body checking, reassurance seeking, medical avoidance

WHAT CAUSES IT
Unknown; psychological, biological, and life-experience factors

HOW IT IS DIAGNOSED
Clinical assessment after appropriate medical evaluation

MAIN TREATMENT
Talking therapy, sometimes supported by medication

CAN IT BE CURED?
Sometimes - sustained recovery is possible with treatment

IS IT AN EMERGENCY?
Sometimes - suicidal intent or inability to stay safe

LONG-TERM OUTLOOK
Often manageable, though symptoms may return during stress

Overview

Illness anxiety disorder is a mental health condition involving an ongoing fear of having or developing a serious illness. The fear continues even when physical symptoms are absent or mild and medical findings are reassuring.

A common example is noticing a headache and becoming convinced it signals a brain tumour. Reassurance may bring short-term relief, but the fear soon returns or shifts to another illness. Some people repeatedly seek tests and medical opinions. Others avoid healthcare because they fear receiving bad news.

The condition was previously grouped under the term "hypochondriasis." Health anxiety is a broader phrase that people often use for worries about health. Illness anxiety disorder is diagnosed when these worries are persistent, excessive, and interfere with daily life.

The fear is real and distressing. It is not deliberate, and it does not mean that someone is pretending to be ill. A person can also have illness anxiety disorder and a genuine medical condition at the same time.

Symptoms

The main symptom is a strong preoccupation with serious illness. The particular illness may change over time. For example, concern about cancer may later become fear of heart disease or a neurological condition.

You may focus closely on ordinary sensations such as a heartbeat, muscle twitch, skin mark, or change in digestion. Normal differences between the sides of the body can also become a source of concern.

Common patterns include:

Anxiety itself can cause physical sensations. These may include a racing heart, sweating, dizziness, nausea, muscle tension, tingling, and difficulty sleeping. These sensations can then seem like more evidence of illness, creating a cycle of fear and checking.

Illness anxiety disorder differs from somatic symptom disorder. In somatic symptom disorder, distress usually centres on significant or persistent physical symptoms. In illness anxiety disorder, physical symptoms are absent or mild, while fear of illness is the main problem.

- Frequently checking the body for lumps, pain, pulse changes, or other signs
- Searching online for symptoms and serious diseases
- Asking family members or health professionals for repeated reassurance
- Seeking repeated examinations, tests, or second opinions
- Avoiding hospitals, appointments, illness-related news, or sick people
- Struggling to concentrate on work, study, relationships, or hobbies
- Feeling briefly reassured before the worry returns

Causes and risk factors

There is no single known cause. The condition probably develops through a combination of how the brain responds to uncertainty, learned beliefs about health, and personal experiences.

Some people find it difficult to accept that no medical test can provide complete certainty. Others may interpret normal body sensations as dangerous. Reassurance and checking can

unintentionally strengthen this pattern because they reduce anxiety briefly, teaching the brain to seek the same relief again.

Factors associated with illness anxiety may include:

Illness anxiety disorder is not caused by weakness or a lack of willpower. Depression, panic disorder, obsessive-compulsive disorder, and other anxiety conditions may occur alongside it, but they are separate conditions.

- A personal or family history of anxiety
- Serious illness during childhood or illness in someone close
- Bereavement or another frightening medical experience
- Growing up with strong attention to health threats
- Ongoing stress or major life changes
- Easy access to alarming or misleading health information

Diagnosis

There is no blood test or scan that confirms illness anxiety disorder. Diagnosis is based on a detailed conversation about your concerns, behaviours, physical symptoms, and the effect on daily life.

A healthcare professional will consider whether a medical condition could reasonably explain your symptoms. This may involve a physical examination, review of previous records, or selected tests. The aim is to investigate symptoms appropriately without repeating low-value tests that may cause more anxiety or physical harm.

A mental health assessment may explore how much time you spend worrying, checking, seeking reassurance, or avoiding care. It may also cover sleep, mood, panic symptoms, substance use, and thoughts of self-harm.

Diagnostic criteria include a preoccupation with having or developing a serious illness, high health anxiety, and excessive health-related behaviour or avoidance. The pattern lasts at least six months, although the particular feared illness can change.

A diagnosis should not be used to dismiss new physical symptoms. Once the condition is recognised, you and your healthcare team can agree on how genuine health changes will be assessed.

Treatment and management

Treatment aims to reduce the power that illness fears have over daily life. It does not require pretending that illness is impossible. Instead, you learn to respond to uncertainty and body sensations in a more balanced way.

Cognitive behavioural therapy, often called CBT, is one of the main treatments. It examines links between thoughts, feelings, body sensations, and actions. Treatment may help you notice catastrophic interpretations, reduce checking, and gradually face situations you have avoided.

A therapist may help you delay or limit internet searches, reassurance seeking, and repeated body checks. This can feel uncomfortable at first. Anxiety often rises temporarily before settling without the usual checking behaviour.

Some people benefit from planned appointments with one main healthcare professional. A consistent plan can reduce repeated urgent visits while preserving access to appropriate medical care. The plan may explain which symptoms can wait for routine review and which require prompt attention.

Medication used for anxiety or depression may be considered, particularly when these conditions occur alongside illness anxiety. Selective serotonin reuptake inhibitors like sertraline or fluoxetine , or SSRIs, are one medication category that has been studied. Medication choice should take account of symptoms, other health conditions, possible side effects, and personal preferences.

Helpful self-management steps can support formal treatment:

Family members may also need guidance. Repeated reassurance can keep the anxiety cycle going, even when offered with care. Calmly acknowledging the distress and supporting the treatment plan is often more useful than repeatedly debating whether an illness is present.

- Keep a brief record of triggers, worries, checking, and what happened afterward
- Set limits on symptom searches and use reliable health information
- Practise allowing a sensation to pass before checking or seeking reassurance
- Return gradually to activities that anxiety has disrupted
- Maintain regular sleep, movement, meals, and social contact

Complications

Without effective support, illness anxiety can take up many hours and restrict work, education, relationships, travel, and leisure. Avoidance may become so strong that a person delays

necessary routine or urgent medical care.

Repeated investigations can also have downsides. Tests may produce unclear or incidental findings that require more follow-up but are not dangerous. Some procedures expose people to physical risks, while repeated appointments can create financial and practical strain.

Depression, social isolation, sleep problems, and other anxiety conditions may develop or worsen. In severe cases, distress can lead to thoughts of self-harm or suicide. These thoughts require urgent support.

Prevention

There is no proven way to prevent illness anxiety disorder completely. Its causes are complex, and some risk factors, such as earlier experiences or a tendency toward anxiety, cannot be changed.

Early support may reduce its effect. Learning how anxiety creates physical sensations, limiting repeated checking, and getting help when worry begins to disrupt daily life may prevent the pattern from becoming more established.

Healthcare professionals can also help by giving clear explanations, avoiding unnecessary repeat testing, and agreeing on a consistent follow-up plan. This does not mean ignoring physical symptoms. It means matching medical investigation to the symptoms and level of risk.

Living with it and what to expect

The course differs from person to person. Symptoms may continue for months or years, improve with treatment, or return during periods of stress, illness, bereavement, or exposure to frightening health information.

Recovery does not always mean never worrying about health. Most people occasionally notice symptoms or fear illness. Improvement may mean spending less time checking, tolerating uncertainty more easily, and returning to activities that matter.

Progress is often uneven. A new sensation or medical appointment may cause a temporary increase in anxiety. Using skills learned in therapy can help prevent a setback from becoming a return to the earlier pattern.

Some people need a focused course of therapy. Others benefit from longer support, treatment for related depression or anxiety, or occasional follow-up. A written plan for managing new symptoms can make it easier to balance appropriate medical care with control of illness

anxiety.

A genuine physical illness can still occur. Living with illness anxiety does not mean every symptom should be ignored. The goal is to respond according to the nature and urgency of the symptom rather than the intensity of fear alone.

When to get medical help

Arrange a routine appointment if health fears persist, repeatedly return after reassurance, or interfere with sleep, relationships, work, study, or normal activities. You do not need to wait six months before asking for support.

Routine follow-up is also appropriate if you are avoiding medical care, repeatedly requesting tests, or spending large amounts of time checking your body or searching for symptoms. Bring a summary of your concerns and previous investigations if possible.

Seek prompt medical assessment for a new, persistent, or worsening physical symptom. Do not assume that a symptom is caused by anxiety simply because you have experienced health anxiety before.

Call emergency services for symptoms that would normally require emergency care, such as severe breathing difficulty, signs of a stroke, loss of consciousness, or severe chest pain. Follow local emergency guidance.

Get urgent mental health help if you have thoughts of suicide, intend to harm yourself, cannot keep yourself safe, or feel at immediate risk. Contact emergency services or a local crisis service, and stay with a trusted person if possible.

Common questions

Is illness anxiety disorder "all in my head"?

The condition affects thoughts, emotions, behaviour, and physical sensations. The distress is real. Anxiety can produce genuine body symptoms, but the main difficulty is the persistent interpretation that these symptoms signal serious illness.

How is illness anxiety disorder different from normal health worry?

Normal worry usually settles after appropriate information or medical review. Illness anxiety repeatedly returns, takes up substantial time, and disrupts daily life despite reasonable reassurance.

Can I have illness anxiety disorder and a real medical condition?

Yes. The two can occur together. The diagnosis describes an excessive and persistent response to illness fears; it does not prove that every physical symptom is harmless. New or changing symptoms still deserve proportionate assessment.

Why does reassurance only help for a short time?

Reassurance lowers anxiety temporarily. This relief can teach the brain to ask for reassurance again whenever doubt appears. Treatment helps you tolerate uncertainty without relying on repeated checking, searches, or tests.

Should I stop checking my body completely?

The aim is usually to reduce excessive checking rather than ignore your health. A therapist or healthcare professional can help you decide what reasonable monitoring looks like and how to reduce checking gradually.

Can illness anxiety disorder go away?

Some people achieve sustained recovery, while others have periods of improvement and recurrence. Talking therapy, consistent healthcare, and treatment of related anxiety or depression can make symptoms much more manageable.

Sources

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