

Theme **Anxious Parents**
Topic **REASSURANCE**

"It will be OK"

Reassurance of patients and their families has been described as 'the most widely used but poorly understood psychotherapeutic intervention in medicine'.

Reassurance does help those who are not highly anxious about their health, but those with high health anxiety may be reassured for only brief periods. Many remain anxious and concerned at follow-up a year later. Doctors tend only to be aware of the immediate reduction in anxiety, not that it may be short-lived. This can give us the false impression that reassurance is a successful intervention, reinforcing our reassurance giving behaviour.

Reassurance by Investigation

Utilising medical tests to rule out illness is a common form of medical reassurance. No test has 100% specificity and sensitivity. There is inherent risk in ordering tests to rule out disease, especially if the likelihood of that disease based on history and examination is very low. It is often assumed that tests, which show no abnormality, are enough to reassure families. Studies refute this, and show that:

- Patients often are not reassured by normal test results
- If reassurance is successful, health anxiety and doubt may recur in the context of ongoing symptoms at times of stress or media publicity about a feared disease.

What does work?

Somatising patients and their physicians often experience conflicting concerns. Patient's fear that a serious disease will develop, their doctor will abandon them, and/or they will suffer or die from neglect. In contrast, physicians often question the validity of using valuable time to treat symptoms that are not verified by objective disease. While patients want to be followed, doctors may consider it a waste of time. Based on our reading of the literature, we suggest:

- Take a history and examine the patient thoroughly.
- Avoid unnecessary investigations and sub-specialist referrals.
- Encourage the patient to return to their normal pursuits, if necessary through a graded programme of increasing activities.
- Consider non-specific interventions that will benefit overall health (exercise, diet, lifestyle changes).
- Follow-up the patient. When a patient knows the physician is interested in seeing them through their complaints, it reassures them that the doctor cares - a benefit that cannot be overestimated.