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EAP HELPLINE



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WHEN ANXIETY TAKES OVER

Everyone feels anxious sometimes. The problem is when this feeling is excessive, not proportional to an insignificant threat. In such cases we are dealing with anxiety disorders.

Anxiety versus fear

The difference between anxiety and fear is significant. Fear occurs when we face real danger, such as loss of health or life. Anxiety, on the other hand, occurs when the danger is not very real, or even just imagined. Anxiety is at the core of many mental disorders.

Phobias

A phobia is a persistent, disproportionate feeling of irrational fear. A person struggling with a phobia is sometimes aware that their terror is not justified, but still avoids certain things or situations. Sometimes imagining the stimulus suffices to trigger anxiety.

Phobias can vary, for example:

- acrophobia – fear of heights,
- arachnophobia – fear of spiders,
- claustrophobia – involves confined spaces,
- bathophobia – is related to depth,
- mysophobia - fear of contamination and germs.

Social phobia

This is a particular type of phobia that can manifest itself in two ways:

1. Generalised – it occurs when a person feels anxious about public speaking, talking to other people, but also about eating, writing or using the toilet when other people are around.
2. Specific – it manifests itself by being afraid of, for example, only presenting oneself in front of a broad audience, while in other social aspects one functions properly.

Social phobia can effectively impede the functioning both at school and at work. People who struggle with it avoid social situations, expressing their opinions in discussions or fighting for their rights.

Panic attacks

These are sudden, unexpected attacks of terror. They reach their greatest intensity within a few minutes or so. They are often related to the desire to escape from a given place. Panic attacks are often accompanied by symptoms such as:

- a feeling of a faster heartbeat,
- sweating,
- nausea, unpleasant stomach sensations,
- dizziness, stupefaction/fainting,
- a feeling of loss of control or senses,
- numbness, tingling, unpleasant skin sensations,
- chills, hot flashes,
- many other somatic sensations.

Individual panic attacks can happen to anyone and are treated as a reaction to increased stress. Treatment is necessary when their frequency increases and they start to be associated with agoraphobia, which is the fear of open spaces, but also of leaving the house in which the person feels safe.

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We recommend the book „The Anxiety Skills Workbook” by Stefan G. Hofmann, which contains many practical exercises for dealing with excessive anxiety and worry.

GENERALISED ANXIETY DISORDER

In contrast to panic attacks, in generalised anxiety disorder there is a constant feeling of anxiety that is independent of the external situation.

People with this disorder constantly struggle with anxiety about their own health or that of their loved ones, they have a sense of vague threat, they worry about everyday events, and have difficulty falling asleep.

These disorders occur in childhood, adolescence as well as adulthood. They can be caused by:

- modelling – when parents worry excessively, children learn such reactions through observation,
- experience of trauma – such as the loss of parents,
- growing up in a home where there is a lot of uncertainty,
- excessive stress, lack of adequate rest.

People struggling with generalised anxiety may exhibit certain coping behaviours. This can include drinking alcohol, calling loved ones and making sure they are OK. They may also prohibit children from entering the playground or swimming in the sea for fear that something bad might happen to them.

OBSESSIVE-COMPULSIVE DISORDER

This disorder is also classified as an anxiety disorder – anxiety is the target of treatment. There are two main symptoms in obsessive-compulsive disorder:

1. Obsessions – involuntary, recurrent and unwanted thoughts that torment the person. They create a lot of tension. For example, when such a person is out of the house, they are constantly thinking about whether they have locked the door.
2. Compulsions – repetitive behaviours that the person sometimes engages in against their will. They aim to reduce the tension resulting from the obsession. Compulsions may manifest as repeatedly washing one's hands or checking if doors are locked.

The most common obsessive-compulsive disorders include behaviours concerning:

- Checking – e.g. if the gas is turned off.
- Hygiene and health – the person, in fear of dirt and consequent illness, may obsessively wash or clean their home.
- Harm – the person may have obsessive thoughts that they have harmed someone.
- Religious issues – sometimes unwanted thoughts about sin arise in strong believers. To relieve the tension, the person may compulsively pray.
- Thoughts related to sexuality – the person will engage in various behaviours to check their orientation, for example.

Anxiety disorders can cause a lot of suffering and make everyday life difficult. It is worth contacting a specialist and undertaking therapy to improve one's mental health.

Don't wait, call now! If you observe anxiety in yourself, talk to a specialist. Your loved ones can also benefit from advice from our specialists. We are here to support you!