



A Study on Cyberchondria and Health Anxiety among College Students

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Abstract

The objective of this study was to investigate the connection between health worry and cyberchondria among young adults. Individuals with health anxiety may conduct excessive online searches due to the growing prevalence of using the internet to find health-related information. This can increase their distress and reinforce unhealthy obsessions with sickness. Two standardized self-report questionnaires: the Short Health Anxiety Inventory (SHAI) and the

Cyberchondria Severity Scale (CSS) were used. All five of the cyberchondria subscales (excessiveness, compulsion, distress, reassurance seeking, and the negative repercussions of being ill) showed substantial positive relationships with health anxiety, according to the results. Notably, obsessive health information seeking and distress were closely linked to health anxiety. According to the research, those who experienced higher levels of health anxiety are more prone to conduct obsessive and excessive searches for health-related information, which exacerbates their anxiety and misery. These actions fuel a vicious cycle of seeking reassurance and growing concerns about one's health. The findings highlight the necessity of psychiatric therapies that target cyberchondria and health anxiety, especially for young individuals who use the internet frequently. Future studies should examine the underlying processes of these behaviors in greater detail and assess therapies that try to lessen compulsive online health information seeking and anxiety connected to health.

Keywords: *Cyberchondria, Health anxiety, self-diagnosis, general anxiety*

Introduction

Nowadays, internet use has grown exponentially to nearly three billion users worldwide, and adolescents and young adults rank first among internet users. It has been reported that the age group that most frequently uses the internet is 14–24 years. It is known that the internet has emerged as a double-edged sword with advantages and disadvantages, such as depressive symptoms and addiction. However, the prevalence of internet addiction varies from 1.5% to 25% in different populations. Health anxiety is a term for mild-severe presentations of illness worries reported among 19.8% of patients attending British specialty clinics, and 3.4% of Australians in a large community survey. About 4-6% of patients in American primary care samples exhibit pathological levels of illness and worry of sufficient severity to meet criteria for the DSM-IV diagnosis of Hypochondriasis. Although cyberchondria itself as a diagnosis was removed from

DSM-5, health anxiety now forms a central feature of both illness anxiety disorder and Somatic Symptom Disorder.

The diagnosis of health anxiety is a relatively new concept. It is often regarded as a synonym for hypochondriasis, but it is not the same. Although there continues to be some dispute over the subject, health anxiety can probably be regarded as anxious hypochondriasis and is best construed as an anxiety disorder, although there is overlap with obsessional disorders. It has a more restricted definition than hypochondriasis, as this describes the primary preoccupation with having a disease. It includes considerable depressive pathology, sometimes to the point of delusions, expressed most severely as Cotard's syndrome. Cyberchondria and health anxiety is a medical condition in which an individual becomes so hyper-aware of the bodily sensations that they spend time in their head analyzing symptoms and figuring out what illness it belongs to, they become so anxious that their body starts making up symptoms that match a disease process they are worried about. It is associated with some unfavorable impacts such as impaired functioning, poor quality of life and lower satisfaction with consultations with doctors.

Access to health information online has potential benefits insofar as educating people about the nature, causes, prevention, and treatment of specific health conditions. However, for some individuals who are distressed or anxious about their health, the internet may be accessed for the purpose of self-diagnosing or obtaining reassurance. Indeed, people who are more anxious about their health appear to search the internet for health information more frequently and for greater amounts of time. These conditions may also encourage proactive health caring engagement and improve research skills, fostering informed discussions with doctors. Additionally, they can build empathy for others and in rare cases, help identify overlooked medical conditions. While balance is a key, these behaviors can promote better health understanding when managed appropriately.

Concern about illness—regardless of actual presence of illness—has been found to predict increased ratings of disability, help-seeking behavior, and number of somatic symptoms reported. Health worry is also associated with attentional bias to illness-related stimuli in both clinically hypochondriacal populations and in non-clinical populations with baseline somatic preoccupations, even after controlling for state anxiety. A key contributing factor related to cyberchondria is the ambiguity of online health information, such that it is often inaccurate, misleading, or incomplete. Individuals seeking reassurance about their health may spend much of their time attempting to determine the validity of health-related information. This process contributes to the cycle in which repeated online searches increase distress and anxiety. The International Classification of Diseases also documented that people with hypochondriac health problems strongly need medical information due to health concerns. If users with hypochondria use the web to search for medical information, they are understood as having cyberchondria.

From a cognitive-behavioral perspective, health anxiety is maintained by several factors increases in physiological arousal as a response to feeling anxious and bias in the way health information is processed and safety seeking behaviors. Reassurance seeking is the most noticeable safety seeking behavior and people with health anxiety feel a constant need to seek reassurance to reduce anxiety and uncertainty about their health.

Cyberchondria

According to Starcevic and Berle (2013) cyberchondria is defined as “the recurrent and anxiety driven online search for health information that can amplify the existing anxiety or distress about the health condition.” Taylor (1999) defined cyberchondria as “the extreme search for information regarding medical care and health on the internet.”

Polat, Delibaş and Bilir (2022) in their study found that (73.5%) of the participants stated that they spent 1-5 hours a day on the internet, (48.1%) were using the internet occasionally for the health-related issues, (31.8%) were always using internet for health-related issues and (17.4%) believed that they had an undiagnosed disease.

Research suggests that more health-conscious individuals tend to conduct more searches and therefore, he or she becomes more concerned with their health (Starcevic, 2017). Bessiere et al. (2010) asserts that the increase in anxiety and distress can interfere with students' academics as well and jeopardise important day to day tasks (Malik et al., 2019; Dagar, Kakodar & Shetiya, 2019).

Health Anxiety

According to Asmundson et al., (2001) health anxiety is defined as “fears and worries about one's physical health and well-being, cognitions about one's health being at risk, and an overall preoccupation with health”. Marcus et al. (2007) defined cyberchondria as “the phenomenon by which individuals are overly sensitive, worried, or anxious about their own health, and may base their anxiety somewhat on assumptions about possible illnesses.”

McMullan et al., (2019) in their study found that there was a positive correlation between health anxiety and online health information seeking ($r = 0.34$, 95% CI (0.20, 0.48), $p < .000$), and between health anxiety and cyberchondria ($r = 0.62$, 95% CI (0.52, 0.71), $p < .0001$). Mohammed et al., (2019) stated that several people did not return to the internet after finding discomforting information, several more experienced cyberchondria where they continuously searched the internet and found more information that contributed to their health-related anxiety and are not deterred by it. This in turn creates a cycle of cyberchondria.

Purpose

The purpose is to study Cyberchondria and Health anxiety among young adults.

Hypothesis

There will be significant positive relationship between cyberchondria and health anxiety among young adults.

Method

Sample

A sample of 30 young adults in the age 18-23 years was taken from Punjab.

Measures

Cyberchondria Severity Scale (CSS): The cyberchondria severity scale McElory et al (2019) is developed by 12 items self-report measure. The CSS contains 5 subscales, Excessiveness, Compulsion, Distress, Reassurance and Mistress.

Short Health Anxiety Inventory (SHAI): The short health anxiety inventory (Salkovskis, Rimes. Warwick. & Clark, 2002) is a developed by 18 items self-report measure. The SHAI contains 2 subscales, the health anxiety and the negative consequences of being ill.

Procedures

The participants were notified of the purpose of the research, the questionnaire was filled face to face, and each participant was grateful for their cooperation. Standardized psychological tests were administered to the participants.

Analysis of Data

Results

Table 1: *N, Mean and Standard Deviation*

	Health Anxiety	Negative consequences of being ill	Excessiveness	Distress	Reassurance	Compulsion
N	29	29	29	29	29	29
Mean	11.8	2.31	6.59	6.31	5.28	4.76
Standard deviation	7.19	1.65	3.05	3.19	2.78	2.57

Table 2: *Correlation between Health anxiety, Negative consequences of being ill, Excessiveness, Distress, Reassurance and Compulsion*

	Health Anxiety	Negative consequences of being ill	Excessiveness	Distress	Reassurance	Compulsion
Health Anxiety	—					
Negative consequences of being ill	0.392*	—				

Excessiveness	0.469*	0.601***	—			
Distress	0.504**	0.518**	0.876***	—		
Reassurance	0.476**	0.527**	0.718***	0.668***	—	
Compulsion	0.518**	0.616***	0.819***	0.711***	0.685***	—
<i>Note.</i> * $p < .05$, ** $p < .01$, *** $p < .001$						

Discussion of Results

The results found out that health anxiety is significantly positively correlated with negative consequences of being ill ($r = 0.392$, $p < .05$). This implies that individuals with higher health anxiety tend to perceive greater negative consequences associated with being ill.

The results also showed a positive correlation between excessiveness and health anxiety ($r = 0.469$, $p < .05$) and negative consequences of being ill ($r = 0.601$, $p < .001$). The result implies that health anxiety is linked with excessive behaviors such as frequent health checks or seeking medical advice. Additionally, those who perceive illness to have severe negative consequences are more likely to engage in excessive behaviors such as emotional distress.

As per results, distress and health anxiety ($r = 0.504$, $p < .01$), negative consequences of being ill ($r = 0.518$, $p < .01$) and excessiveness ($r = 0.876$, $p < .001$) also have positive correlation.

Further, the results showed significant positive relation between reassurance and health anxiety ($r = 0.476$, $p < .01$), negative consequences of being ill ($r = 0.527$, $p < .01$), excessiveness ($r = 0.718$, $p < .001$) and distress ($r = 0.668$, $p < .001$). Compulsion has a positive relation with all other five variables, i.e., health anxiety ($r = 0.518$, $p < .01$), negative consequences of being ill ($r = 0.616$, $p < .001$), excessiveness ($r = 0.819$, $p < .001$), distress ($r = 0.711$, $p < .001$) and reassurance ($r = 0.685$, $p < .001$).

In a recent study by Balyan and Srivastava (2024) found a positive correlation between cyberchondria and health anxiety. The researchers found a strong significant positive correlation between cyberchondria and health anxiety ($r = 0.713$, $p < .01$). The research supported that individual who frequently seek health information online and have traits of cyberchondria are more prone to worry about their health. Additionally, previous researchers supports that this type of anxiety is more common in younger person with higher level of education than in general population (Malik et al., 2019; Dagar, Kakodkar & Shetiya, 2019; Bati et al., 2018; Fergus, 2014).

Conclusion

Investigating the relationship between health concerns and cyberchondria in young adults (18–23 years old) was the aim of this study. Given how common it is to use the internet to discover information about health, individuals who suffer from health anxiety may have searched the internet excessively. This might have made them more distressed and strengthened their obsessive fixation with illness. Thirty young adults from Punjab, India, made up the sample. They answered two standardized self-report questionnaires: the Short Health Anxiety Inventory (SHAI) and the

Cyberchondria Severity Scale (CSS). The findings indicated that there were significant positive correlations between health anxiety and all five of the cyberchondria subscales: excessiveness, compulsion, distress, reassurance seeking, and the negative consequences of being ill. Interestingly, there was a strong correlation between health anxiety and compulsive health information seeking and discomfort. According to the study, individuals with higher degrees of health worry were more likely to seek excessively and obsessively for information on health, which made their anxiety and misery worse. These behaviors fed a vicious cycle of increasing health concerns and seeking reassurance. The findings highlighted the necessity of psychiatric therapies that targeted cyberchondria and health anxiety, especially for young individuals who used the internet frequently. Future studies should have examined the underlying processes of these behaviors in greater detail and assessed therapies that aimed to lessen compulsive online health information seeking and anxiety related to health. Studies should consider long-term impacts and incorporate a variety of samples in order to enhance future study and address cyberchondria. Deeper causes can be found by investigating psychological elements like stress and sadness. Compulsive health searches may be lessened with the use of interventions like mobile apps and cognitive behavioral therapy (CBT). Improving health literacy and educating people about false information found online can also help reduce anxiety. The loop of excessive online health-seeking activity can also be broken by recognizing how social media might heighten health concerns and encouraging mindfulness practices.

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