

A survey on phobia - An anxiety disorder

Sneha Kannan, R. Gayatri Devi*, A. Jyothipriya

ABSTRACT

Introduction: A fear is a sort of nervousness issue characterized by an industrious and exorbitant dread of an article or circumstance. The influenced individual may encounter a wide range of side effects. Fear can be partitioned into explicit fears such as social fear and agoraphobia. To understand a person's fear to a particular object or situation and the consequences faced in daily life due to their phobia. It is a type of anxiety disorder, defined by a persistent and excessive fear of an object or situation. **Materials and Methods:** A cross-sectional survey-based study was conducted among 50 South Indian population. A questionnaire was prepared about main reason and cause behind the phobia. This will be distributed through SurveyPlanet. The data were collected and analyzed with statistics. **Results:** From the result, it can be statistically analyzed that most of the people aged between 18 and 25 have the fear toward insects and most have no fear. From the statistics, the phobia affects their daily life by not wanting to face fear, so they keep away even from familiar places. The best treatment for phobia is that of confronting the fear to family and friends. **Conclusions:** We can conclude that phobia is an anxiety disorder that is experienced by every individual to any particular thing. However, from the statistics, fear can be easily overcome by sharing with family and friends than by medications.

KEY WORDS: Anxiety, Medication, Nervousness, Phobia

INTRODUCTION

A fear is a sort of nervousness issue characterized by an industrious and exorbitant dread of an article or circumstance. The influenced individual may encounter a wide range of side effects.^[1] Fear can be partitioned into explicit fears such as social fear and agoraphobia. For example, social phobia is the avoidance limited to social media because of fear of embarrassment whereas acrophobia is linked to fear of places where it is hard to escape like a lift that has overcrowded people. Among a great deal of fear, the most widely recognized one among all is dread of insects, dread of snakes, and dread of a circumstance happens worried about judgmental view towards them.^[2] Agoraphobia is worried about dread of a circumstance happens in light of the fact that it is felt that departure would not be conceivable.^[3] It would be better if the fear is settled by introduction to various things or item rather than prescription. Some fears such as social fear and agoraphobia are frequently treated with a blend of advising and drug.^[4] There are numerous youth fears that are calm regular, and they create at various explicit ages. There are

numerous side effects from which we can see whether an individual has fear or not.^[5] Physical indications of a fear incorporate the accompanying trouble in breathing hustling or beating heart chest torment or snugness trembling or shaking feeling bleary-eyed or discombobulated an agitating stomach hot or cold flashes shivering sensations perspiring.^[6] There are distinctive approaches to beat a dread. Self-help methodologies and treatment can both be viable at treating fear. The initial step to conquer dread is by confronting your feelings of trepidation with extra special care.^[7] First, make a rundown of a startling circumstance identified with your fear. The second step is to remain quiet and face the alarm that they have faced and even to share their phobia to close friends and relatives to get over the fear easily.^[8] It is recommended that specific phobias can be treated with exposure therapy where the person is introduced to the situation or object in question until the fear resolves.^[9] Medications are not useful in this type of phobia.^[2] Social phobia and agoraphobia are often treated with some combination of counseling and medication. Medications used include antidepressants, benzodiazepines, or beta-blockers.

MATERIALS AND METHODS

The study involves questionnaires consulting the phobia experienced by a person due to an object

Access this article online

Website: jprsolutions.info

ISSN: 0975-7619

Department of Physiology, Saveetha Dental College, Saveetha Institute of Medical and Technical Science, Saveetha University, Chennai, Tamil Nadu, India

*Corresponding author: R. Gayatri Devi, Department of Physiology, Saveetha Dental College, Saveetha Institute of Technical and Medical science, Saveetha University, 162, Poonamallee High Road, Chennai – 600 077, Tamil Nadu, India. E-mail: gayatri.physio88@gmail.com

Received on: 04-10-2018; Revised on: 15-12-2018; Accepted on: 28-01-2019

or thing. Results pertaining to questionnaire were correlated and statistically analyzed.

Exclusion Criterion

Individuals who do not face any kind of phobia were excluded from the study.

Inclusion Criterion

The survey was conducted on subjects between the age groups 18 and 40. This is required to ensure that nutrition acts only as a modulator of cognition, if it does, and its role as a growth factor is not considered.

RESULTS

From the result, it can be statistically analyzed that most of the people aged between 18-25 have the fear towards insects and majority have no fear. The best treatment for phobia is that of confronting the fear the fear to family and friends.

DISCUSSION

As the result elucidates, the age category used in this survey is from 17 to 40 years of age and they were statistically analyzed [Figure 1]. From the figure, majority of the people who took up this survey were aged 18–25 years of age. Individuals were asked

about the fear or phobia of anything or situation, and the result was recorded statistically for different kinds of phobia [Figure 2]. Majority of them had no fear or phobia and the second highest members (15%) had fear on insects.^[10] Another observation is that the questionnaire had questions such as how can an individual avoid these phobias. The answer given statistically was that to keep away from the phobia that he/she faces [Figure 3]. Another important and the most relevant question was that how would the phobia affect their daily life, and the answer had results as they cannot relax anytime due to keeping a watch for it (33%), while other set of people (25%) confronted that they never want to try new things [Figure 4]. Individuals were asked about whether have they talked about their fear or phobia to any person.

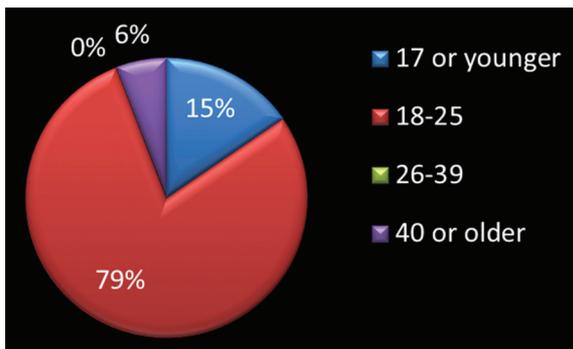


Figure 1: Which category below includes your age?

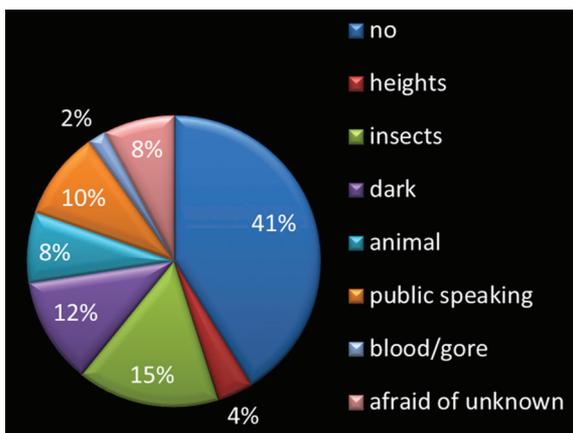


Figure 2: In general, do you have a fear or phobia of a person or thing or situation? If so what among these?

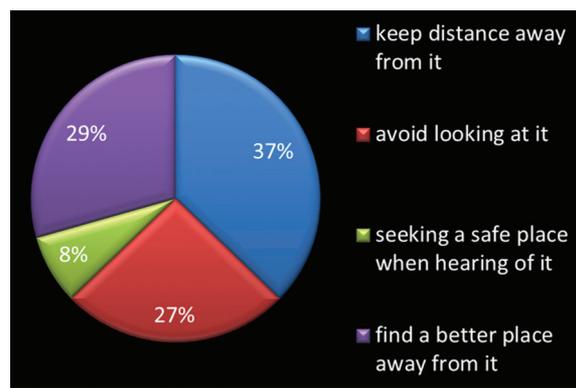


Figure 3: How do you think you avoid these phobia?

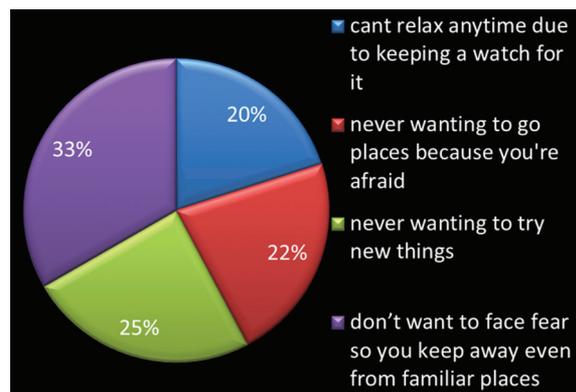


Figure 4: How would your phobia affect your daily life?



Figure 5: Have you talked to anyone about your fear?

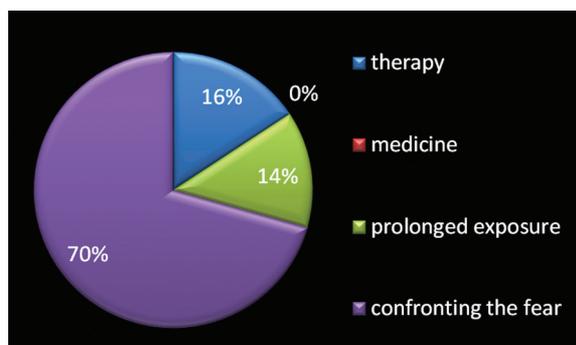


Figure 6: Which treatments for phobia are the best?

The statistics shown that majority of people (70%) admit that the best treatment is to confront the fear to any person they feel comfortable.^[11] Hardly, 2% of people say that they have shared their phobia to family members [Figure 5].

The concluding question made was to find out the best treatment one can give for the people facing phobia. The statistics show that majority set of people (70%) admit that the best treatment is that to confront the far to any person they feel comfortable.^[12] 16% of the people admit that medicine can be a better option for treating a person with phobia [Figure 6].

CONCLUSIONS

From the statistics, the phobia affects their daily life by not wanting to face fear so they keep away even

from familiar places. The best treatment for phobia is that of confronting the fear to family and friends.

REFERENCES

1. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 5th ed. Arlington: American Psychiatric Publishing; 2013. p. 190, 197-202.
2. Hamm AO. Specific phobias. *Psychiatr Clin North Am* 2009;32:577-91.
3. Nieginski E, Moreau D. *Straight A's in Psychiatric and Mental Health Nursing*. Ambler, PA: Lippincott Williams and Wilkins; 2006. p.172.
4. Anxiety Disorders. NIMH; 2016. Archived from the original on 27 July 2016. Retrieved 27 July 2016.
5. Perugi G, Frare F, Toni C. Diagnosis and treatment of agoraphobia with panic disorder. *CNS Drugs* 2007;21:741-64.
6. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 5th ed. Arlington: American Psychiatric Publishing; 2013. p. 204, 218-9.
7. LeBeau RT, Glenn D, Liao B, Wittchen HU, Beesdo-Baum K, Ollendick T, *et al.* Specific phobia: A review of DSM-IV specific phobia and preliminary recommendations for DSM-V. *Depress Anxiety* 2010;27:148-86.
8. Carol T, Marcia L. *Diseases of the Human Body*. Philadelphia, PA: F.A. Davis Company; 2011. p. 153.
9. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 4th ed. Washington, D.C: American Psychiatric Association; 1994. p. 405.
10. Available from: <http://www.verywellmind.com/what-is-the-fear-of-insects-2671770>. [Last accessed on 2017 March 18]
11. Available from: <http://www.helpguide.org/articles/anxiety/phobias-and-irrational-fears.htm>. [Last accessed on 2016 June 30]
12. Alden LE. Short-term structured treatment for avoidant personality disorder. *J Consul Clin Psychol* 1989;57:756-64.

Source of support: Nil; Conflict of interest: None Declared