Managing Worry

“I don’t lie there worrying about not sleeping, I get up – distraction helps.”*

Why Is this Important?

Having a health condition leads to various problems that may cause you to worry. It’s understandable that you might be concerned or fearful about the risks associated with your health condition. Most people with health conditions worry about the future: whether the condition will become worse, whether they’ll be able to keep up their activity level and whether the pain or discomfort will intensify. These are real problems and thinking about them can help you come up with solutions. After all, it’s usually better to think about a serious problem than to ignore it.

But worry can become excessive. You might find yourself worrying about a problem all the time, so much that it disrupts other activities or interests. For example, you’re trying to watch a movie with a friend but you can’t concentrate because you’re too worried. Or, you might not be able to sleep properly because intrusive worry keeps you awake. When worry becomes too much, when it’s causing more harm than good, then you’re dealing with excessive worry (what we call Worry Thoughts).

Here’s a diagram that shows how Worry Thoughts can affect your emotions, physical state and actions:

* Quote from a person in a chronic illness support group.
How Can I Reduce My Worrying?

We’re going to show you how to reduce excessive worrying and how to worry more effectively.

The steps toward Managing Worry are:
1. Identify Worry Thoughts
2. Challenge Worry Thoughts
3. Practice calming and realistic thinking
4. Schedule Worry Time
5. Use these methods to protect your sleep

1 Identify Worry Thoughts

Worry Thoughts can be recognized by at least one of these features:

- You think too much about a problem, to the point that it interferes with other activities. Thinking so much about the problem makes it difficult to be with family or friends, enjoy entertainment or concentrate on work.

- You imagine the worst possible outcome of the problem, mentally magnifying the negative possibilities and ignoring any possible positive outcomes. This kind of thinking is known as “catastrophizing.”

- You experience a high level of anxiety along with the worrying thoughts, whether the anxiety is felt physically (tense muscles, increased heart rate, rapid breathing, headache, stomach problems, etc.) or emotionally (fearfulness, apprehension, sense of impending doom).

- You have difficulty falling asleep or wake frequently during the night because of your worry.

- You rarely come up with a better understanding of the problem or new solutions — usually, your worrying just goes in circles, around and around the same kinds of problems without leading to any useful action.

- You find yourself trying to suppress the Worry Thought, to “stop thinking it.” Although it’s understandable that you would want this worrying to stop, just ordering yourself to stop thinking it usually doesn’t work. Sometimes, the harder you try to stop a Worry Thought, the more frequently it returns!
When you worry excessively, it usually feels like you are problem solving, but it doesn’t take you any closer to finding real solutions. Here are two common types of Worry Thoughts:

**Overestimating the Likelihood that Bad Things Will Happen**

You tell yourself that a very bad outcome will certainly happen, even when you’ve been reliably told that a very bad outcome is unlikely. For example, you tell yourself that you will become physically helpless and totally dependent on other people, even after you’ve been told by your physician that only a tiny proportion of people with your condition become extremely impaired. It can be helpful to ask yourself, “How often has this happened before?” and “What is the realistic likelihood that this will actually happen?” You can get this information from your healthcare provider.

**Catastrophizing**

You magnify how bad the situation is or how bad a future situation will be – you see the situation as more dangerous or unbearable than the facts justify. For example, if you have a heart condition, you tell yourself that any physical exertion will trigger a heart attack or injure your heart muscles, even though your physician told you that mild physical exertion is good for you and very unlikely to cause a problem with your heart.

*Write down some Worry Thoughts that have been bothering you lately:*
Challenge Worry Thoughts (and replace them with realistic ones)

Coping with Worry Thoughts involves deliberately rethinking situations that cause you anxiety. You can use a strategy called Challenging Worry Thoughts.

Think of a situation about which you’ve been worrying. First, make a brief note about the situation. Second, write down the Worry Thoughts that were making you anxious. Third, think about the situation and try to come up with more calming and realistic thoughts, using the Reality Questions below.

Reality Questions

CAN I GET MORE EVIDENCE, MAYBE BY ASKING SOMEONE ABOUT THE SITUATION?

It’s often helpful to get another person’s opinion about the situation. For example: you’ve been worrying constantly that your health will keep getting worse – so you speak to the clinic nurse, who informs you that most people with your health condition are able to stabilize their symptoms.

WOULD MOST PEOPLE AGREE WITH THIS THOUGHT? IF NOT, WHAT WOULD MOST PEOPLE THINK?

Just by imagining how most people would react to a Worry Thought, you might be able to come up with a more fair and realistic way of thinking. When you step outside yourself and examine your thinking from another perspective, it’s easier to see how your thoughts might be distorted.

WHAT WOULD I SAY TO A FRIEND, IF MY FRIEND WERE IN A SIMILAR SITUATION?

If a friend of yours were worrying too much, what would you say to her? It’s likely that you would be able to help her think about the situation more fairly, looking at it in a more balanced way. You might remind your friend of tough situations she handled in the past. You might find it easier to think in a realistic way for a friend than for yourself.

WHAT WILL HAPPEN IF I CONTINUE TO THINK THIS WAY?

It’s important to understand what results are likely if you continue to worry excessively. Consider the effect of worry on your enjoyment of time with other people, willingness to try activities, ability to get restful sleep, physical symptoms, etc. What might be the results for you and others if you continue to worry excessively?

WHAT IS A MORE ENCOURAGING OR USEFUL WAY OF THINKING?

Can you come up with another thought that would have better results? Is there a way of thinking that would be more encouraging and helpful in improving the situation?
Example:

This is how Alice, a young woman dealing with chronic pain, answered these questions:

**Worry Thought:**

What if the pain just gets worse and worse, until I can’t work anymore?

Can I get more evidence, maybe by asking someone about the situation?

I asked my family physician – she told me that my pain has likely stabilized and that I can probably make some improvements by participating in my pain management group. The group leader thinks I will be able to improve my activity level and my pain management.

Would most people agree with this thought? If not, what would most people think?

My friends think I’m being too pessimistic – but I’m not sure they really understand what this kind of pain is like.

What would I say to a friend, if my friend were in a similar situation?

I would never say that kind of thing to a friend, especially when it’s far from certain. It’s too discouraging.

What will happen if I continue to think this way?

I’ve been so worried that I’ve been having problems concentrating at work. Also, I’m sleeping badly, partly because of worry, and that will become a big problem if it doesn’t improve.

What is a more encouraging or useful way of thinking?

I need to keep reminding myself that my pain is most likely to stay the same or even get better – especially if I practice the pain management methods I’m learning in the pain group.

To the right is a worksheet you can use to come up with more calming and realistic thoughts. Make extra copies if you need to. Do this worksheet for at least one of your Worry Thoughts.

3 Practice Calming and Realistic Thinking

It’s not enough to come up with a calming and realistic thought just once. Worry Thoughts can repeat over and over, until they become automatic. More balanced thinking will help you feel better, but it won’t be automatic – at least not for a while. The good news is that reducing worry doesn’t take years. In fact, people who have been worrying excessively often begin to notice a difference after only a few weeks of practicing the Managing Worry skill.

Stressful situations can trigger worry. Examples of stressful situations are:

- An increase in physical symptoms or pain
- Forgetting to take your medication
- Visiting a new specialist

In order to get the greatest benefit from this skill, you must pay attention to your thinking in situations that are likely to trigger worry.
Worry Thought:

- Can I get more evidence, maybe by asking someone about the situation?

- Would most people agree with this thought? If not, what would most people think?

- What would I say to a friend, if my friend were in a similar situation?

- What will happen if I continue to think this way?

- What is a more encouraging or useful way of thinking?
Write down a few situations where you often have Worry Thoughts:

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When you find yourself in stressful situations, deliberately practice calming thinking. Don’t assume that it will happen on its own. You have to tell yourself how to look at the situation, just as you might give advice to a friend. Talk back to the worry thinking. Don’t allow excessive worry to occur without replying to it. Every time you talk back, you make the worry thinking weaker and the realistic thinking stronger. Eventually, realistic thoughts will have more influence over you than Worry Thoughts.
In the beginning, realistic thinking can seem false. If your thinking has been distorted for some time, it can be difficult to see the truth. Imagine that you’ve been asking yourself repeatedly, “What if I keep getting worse? What if my illness is more serious than my doctors realize? What if I’m the rare case?” Having these thoughts repeatedly will cause you to feel anxious. Let’s say you recognize this as unrealistic thinking and instead come up with a realistic thought: “There’s a high probability that I won’t get worse, in fact that I will get better, so why waste my time thinking about very unlikely outcomes?” At first, this realistic thought will seem false, as though you’re just fooling yourself. Only with time and repetition will realistic thinking – the truth – begin to feel true. Eventually you’ll come to accept realistic thoughts more naturally.

### Schedule Worry Time

A big problem with excessive worry is that it interferes while you’re trying to do something else – watch a movie, talk with a friend, or concentrate on a book, for example. This leads to negative results: first, it’s harder to enjoy these activities or do them properly; and second, you don’t get to focus properly on the problems you’re worrying about because you’re distracted by the other activity! You can’t watch a movie and think about an important problem at the same time. Both activities will suffer.

As we explained above, trying to force yourself to “stop thinking it” doesn’t usually work. But what you can do instead is schedule a particular time during the week when you will concentrate on worrying about your problems. During this **Worry Time**, you’re not allowed to do anything that would distract you from worrying. Schedule a particular time when you can set aside an hour just for worrying, making sure that you won’t be interrupted during this important task. Make sure to write this Worry Time into your schedule and do it at the time you’ve set, and only at that time.

The aim of this scheduled Worry Time is to allow you to worry towards solution instead of worrying in circles. When worry is done this way, it’s more likely to help you resolve your problems. In order to get the full benefit from worry, set yourself up in a comfortable spot, maybe at a desk in a quiet area, and make sure you have paper and pen or a computer – whatever helps you think about problems and solutions. Scheduling Worry Time can increase the amount you are worrying in the short term – but in the long term, excessive worry will be replaced by problem solving.

A useful way to organize your Worry Time is by using the Solving Problems section of this book. It shows you how to approach your problems in a series of steps, like the example on the next page.
Problem: I’m afraid that if I do any physical activity, I will worsen my heart condition.

<table>
<thead>
<tr>
<th>Action</th>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Give up almost all physical activities, rest in bed most of the day.</td>
<td>• I wouldn’t be taking a chance on activity making my condition worse.</td>
<td>• The rehab nurse told me that becoming inactive would actually weaken me and worsen my health condition in the long run.</td>
</tr>
<tr>
<td></td>
<td>• I wouldn’t feel the anxiety I get when I’m out walking.</td>
<td>• My world would become much smaller. It would be boring and I would feel lonelier.</td>
</tr>
<tr>
<td>Stop being so concerned about my physical symptoms, just go out and do lots of things every day, like I used to.</td>
<td>• It would be more interesting than staying home all the time.</td>
<td>• The nurse also told me that if I push myself too hard and tire myself out, I will “crash” and be unable to do much for a long time.</td>
</tr>
<tr>
<td>Pace my activities so that I am setting activity goals after checking with my healthcare providers.</td>
<td>• It would be more interesting than staying home all the time.</td>
<td>• I would feel some anxiety, so I would have to increase my activity goals slowly.</td>
</tr>
<tr>
<td></td>
<td>• By checking with the rehab nurse and my doctor, I would be less likely to overdo it or worsen my health.</td>
<td></td>
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</tbody>
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You can work on each of the problems you’ve been worrying about, one after another. You might want to make a series of folders, one for each problem, to store your notes and problem-solving activities. Then, when you settle yourself in your worry place, pull down the first folder and get to work figuring out possible actions to try in the next week. Once you’ve done all you can on that problem and have no further ideas, close that folder, put it back on the shelf and grab the next problem folder.

Try to stay in your worry place until the scheduled time is over. If it looks like you haven’t scheduled enough time for all the worrying you need to do, make the Worry Time longer next time. If it looks like you’ve scheduled too much time for
worry, make it shorter. What’s important is that your worries will get all the time they need.

If a Worry Thought pops into your head while you’re trying to do something else like watch a movie, don’t just try immediately to stop thinking it. That usually doesn’t work. Remember that having a Worry Thought means you’re concerned about a problem and you need to think about it – just not right now. Imagine instead that you gently place that Worry Thought in a folder on a shelf, as though telling it: “You’re important, so I have to think about you carefully – I’m going to put you on the shelf and bring you down during my Worry Time – you’ll get all the time you need.” Often, reminding yourself that worrying about the problem is delayed, not canceled, is enough to calm the worry.

5 Use These Methods to Protect Your Sleep

If you’ve been worrying too much, it might affect your sleep. You might lie in your bed tossing and turning, trying to fall asleep – but instead your thoughts are circling around the same worries again and again. Worries seem particularly upsetting in the middle of the night. – It’s hard to be realistic at 3am, and it’s easy to get caught up in catastrophic thinking.

Here’s what you should try: if you’ve been lying in bed for 20 minutes trying to get to sleep but worries are interfering, get out of bed. Go to your worry place and get the folders where you’ve been keeping track of your problems. Take down the first folder and read over what you’ve written about that problem. After you’ve read it over, ask yourself: “Is there anything I’ve thought of or learned that I should add here?” If the answer is No, then move on to the next problem folder. If the answer is Yes, then add in your new information or plans and then move on to the next problem. It probably won’t take long to work through all of the problem folders – mostly, you’ll be scanning over what you’ve already written during your Worry Time.

When you’ve looked over all of the problem folders, put them back on their shelf. Then, when you eventually start to feel sleepy, go back to bed. If the worries start up again in a way that’s interfering with your sleep, review the problem folders again. Often only a few repetitions of this method are needed before you’ll drift off to sleep.
Managing Worry:

David’s Story
David was the director of marketing at a midsize corporation. He prided himself on his ability to lead complex projects. He devoted himself to his job, often working long hours. But the only way he relaxed was to take frequent cigarette breaks. David had been a pack-a-day smoker for about 20 years. He often thought about quitting, and intended to join a stop-smoking program when he wasn’t feeling so stressed.

But at the age of 57, David noticed that he had a persistent cough. He also became very breathless after working out. He went to his family doctor for a check-up. After examining him and sending him for a lung function test, his doctor informed him that he was suffering from chronic obstructive pulmonary disease (COPD). Although this was a shock, David was relieved that it wasn’t lung cancer. Still, he noticed that he was having a lot of difficulty with breathing and energy.

Over the next few years, this became worse – and finally he had to take early retirement. This was a dramatic change – without his job, David felt kind of lost. He was worrying a great deal of the time, especially when he noticed that his breathing was strained.

One day he was hurrying to cross the street and suddenly felt like he couldn’t catch his breath, like he was suffocating. He felt a rush of fear. This subsided after a few minutes, but left him shaken. He became very nervous about physical activity – any change in his breathing sent him into a state of panic. He visited a nearby walk-in medical clinic and the doctor there prescribed anti-anxiety medication.

David tried the medication and it relaxed him. But he continued to avoid physical activity and to feel frightened if his breathing changed, thinking that he would suffocate. When David next visited his family doctor, the physician assured him that moderate physical activity would be good for him. But David had difficulty participating in physical rehabilitation because he felt so worried about activity. The physician gave him a copy of this workbook, suggesting he read the sections on Managing Worry and Relaxation, and also referred him to a clinical psychologist.

The psychologist helped David understand what had happened to him. When a person with COPD engages in a sudden burst of activity, he is likely to have temporary difficulty getting enough oxygen. It may feel like he can’t breathe, and he might become very anxious. Unfortunately, being anxious contributes further to a sense of breathlessness – and creates more fear!

The best way to break this circle is not to avoid all activity and rely on anxiety medication. Instead, it’s best to: 1) avoid sudden bursts of activity; and 2) identify unrealistic thoughts like “I’m going to suffocate” and replace them with realistic thoughts. The psychologist showed David how to do Slow Breathing (see the Relaxation skill). When David found himself breathless after activity, he would practice Slow Breathing and remind himself that it would soon pass and was not life-
threatening. His breathing would then gradually normalize. As he learned to use this new strategy, David worried much less and no longer needed the anxiety medication.

David also worked on another problem with the psychologist. As they discussed David’s thoughts about his health, David reported having a Depressive Thought: “Because I did this to myself (by smoking), I deserve to suffer.” Thinking this way made it harder for David to put energy into self-care. David used the skill of Managing Depressive Thinking to challenge this unfair thought:

David practiced these realistic thoughts, and they made it easier to follow the self-care program. Helped by the skills he learned from the psychologist and this workbook, David began to gradually increase his physical activity. He joined a Quit Smoking group. He reminded himself to avoid bursts of activity and to replace unrealistic thoughts about his breathing with realistic ones. He kept practicing the Slow Breathing method. Using these self-care strategies, his overall health and lung capacity improved. And, he was much happier!