Health care phobias in the general population – unrecognized and untreated

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Many patients experience fear in coming to their doctor’s office or the hospital and some of their fears reach phobic proportions. Phobias of needles, the sight of blood or open wounds, pain, anesthesia, and dental procedures are all common. Some patients develop conditioned avoidance of environmental cues associated with their phobia, such as the “smell of medicine,” or the hospital environment in general. In clinical samples of patients with health care-related phobias, fainting in the phobic situation has been extremely common (up to 50-75%).

This study by Bienvenu and Eaton is the first general population based study of such phobias utilizing modern diagnostic criteria. The investigators administered the Diagnostic Interview Schedule (DSM-III-R) to 1,920 community residents in the Baltimore Epidemiologic Catchment Area follow-up study, conducted from 1993-96. Three of the most common health care-related phobias examined were fears of blood, injections, and dentists. To meet criteria as a specific phobia, the fear must have been persistent for months to years, almost always provoke extreme anxiety, be recognized as unreasonable and cause significant interference in functioning. The lifetime prevalence of phobias of blood, injections or dentists was 3.5% with a median age of onset of 5.5 years. Almost 80% had had symptoms within the past six months. Subjects with phobias had
higher lifetime histories of fainting and seizures than those without. While over half had told a physician or other health care professional of their fears, none reported seeking mental health treatment for their phobias. These phobias were more common in those with less education and in females. Those with phobias had 4-8 times the expected lifetime prevalence of other psychiatric conditions including major depression, obsessive-compulsive disorder, panic disorder, agoraphobia, social phobia, and other simple phobias.

This study should remind us that health care-related phobias are among the many reasons for delays in seeking medical care or non-adherence with physicians’ recommendations. Effective psychological and drug therapies are available, but none of the community residents in this study sought mental health treatment. A clinical vignette demonstrates the significance of this article. An infertile young woman who desperately wanted a child was considering remaining childless because the infertility work-up involved extensive blood collection. Every time she had attempted to have blood drawn she had experienced extreme anxiety and had fainted. Even the thought of blood collection prompted anxiety. She was finally referred for psychiatric evaluation and treatment. Her specific phobia to needles was recognized and treated with systematic desensitization. She was able to undergo the complete infertility work-up and treatment. She now has a healthy child.