

## Cognitive behavioural therapy (CBT)

This information factsheet is intended to help those with AF-related anxiety to understand CBT, how it can help improve quality of life, and how to access this therapy.

Atrial Fibrillation is the most common heart rhythm disorder and can have a considerable impact on an individual's quality of life. AF can be an unpredictable and stressful condition, with potentially serious complications. It is not unusual for people with AF to need several medical appointments, various tests, and a number of different treatment approaches. Any of these can leave people feeling worried.

We are all different. Some people cope well with AF, but for others it can be a debilitating or disabling condition with feelings of frustration. People who experience AF and those supporting them can experience significant levels of anxiety and emotional distress brought about by sometimes frightening symptoms like palpitations, dizziness, or breathlessness. Psychological distress may be caused by, the loss of, or changes in, roles at work and in the home. Challenges to self-confidence and the sense of being healthy can sometimes be worse than the physical symptoms'.

### What is CBT and how can it help?

CBT is a talking treatment directed at the ways people respond to, and cope with, present difficulties. It is based on understanding how particular situations and conditions impact on what we think, on what we do (or avoid), our physical feelings and our emotions.

Psychological reactions to symptoms of AF range from panic to frustration and depression. CBT addresses these thought processes and helps people to adjust to a diagnosis of AF.

The CBT approach supports a self-management coping strategy and is tried and tested. It is one of the most effective treatments for conditions where anxiety, frustration and depression are significant factors.

Thoughts, actions, emotions, and physical feelings can all interact with each other. People who are prone to anxiety might worry about experiencing an AF episode whilst away from a 'safe' environment, such as while shopping, travelling, or at work. They might imagine negative consequences or they may avoid some situations by taking evasive 'precautions'. People may become oversensitive to normal physical signs which could remind them of AF, and this may lead to further anxiety.

Adrenaline-driven symptoms such as a racing heart and faster breathing can leave people feeling dizzy, unwell, or lead to a panic attack. The resulting vicious cycle can complicate an originally simple condition and could result in increased frustration and depression.

### How can I obtain CBT?

Your GP can refer you for CBT, or maybe your hospital specialist team.

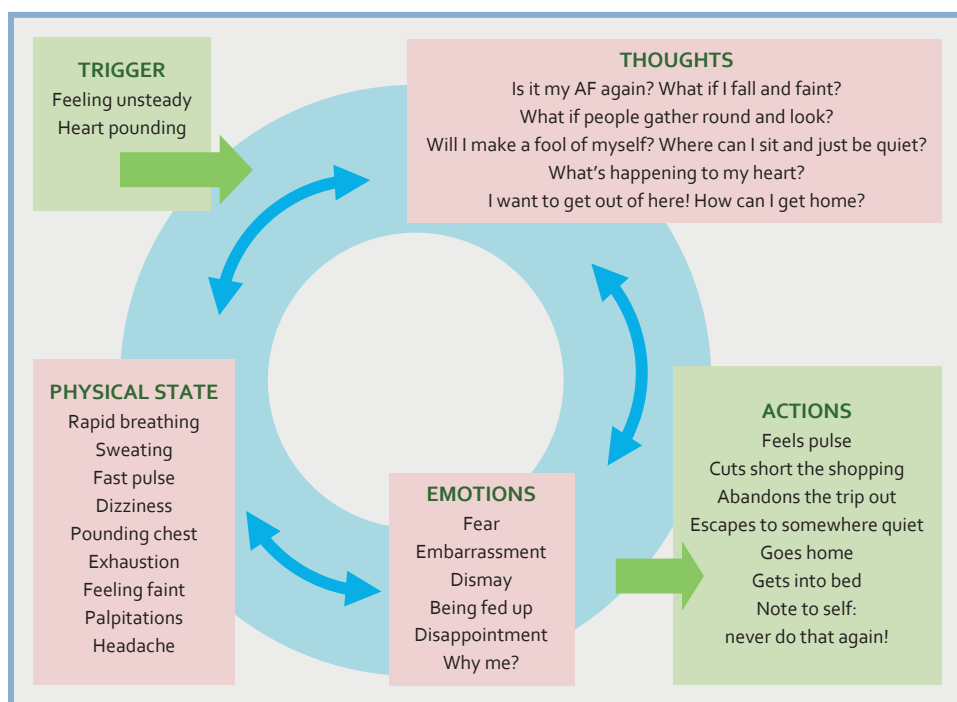
The British Association for Behavioural and Cognitive Psychotherapies ([www.babcp.com](http://www.babcp.com)) have a register of accredited CBT therapists.

Your GP can refer you to IAPT ('Improving Access to Psychological Therapies'). Further information can be found at [www.iapt.nhs.uk](http://www.iapt.nhs.uk)

There are some interactive self-help computer based programmes, for example 'Beating the Blues®' and 'FearFighter' available through your GP and online. All good bookshops stock titles on CBT.

## Case study

Eve has been dreading going shopping and worries about how she will cope if an episode of AF develops. When she gets there, the supermarket is busy, and soon she starts to feel her heart pounding. She feels light headed and sick, and starts to breathe faster.



Working with an experienced CBT practitioner, Eve can start to identify her difficult experiences and place them into these separate parts. This helps her to understand the 'vicious circle' which is increasing her anxiety and making her want to avoid situations. This could allow her to recognise the issues and start to identify areas for change. For example, Eve might find it helpful to develop skills to manage many of these symptoms, such as checking she is not over-breathing and learning ways to gently lower her anxiety.

## Summary

CBT provides an approach to guide you, and your therapist, to map out current experiences in detail and look for opportunities which will allow you to try out alternative ways of thinking and acting. The goal is to improve your quality of life by addressing emotional distress and managing physical symptoms better. It is an active therapy – you have to be prepared to try out different approaches and see what the impact is. Sometimes this can make you more anxious before you improve. CBT usually involves working collaboratively with a therapist, perhaps for six weeks to six months. It is not a 'quick fix' but for many it has resulted in significant improvements to their quality of life.

**Acknowledgments:** AF Association would like to thank all those who have helped in the development of this publication. Particular thanks are given to Dr Christine Baker, Dr Dorothy Frizelle, Dr Graham Gillespie and Dr Matthew Fay.