



Needle phobias a real pain for many

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A fear of needles is believed to affect as many as one in 10 people but some anaesthetists are increasingly turning to hypnosis and other relaxation techniques to help those who suffer from the condition.

According to Dr James Griffiths, a consultant anaesthetist at Melbourne's Royal Women's Hospital, needle phobia is a common condition that causes significant anxiety for patients and frequently presents a challenge for anaesthetists as they prepare patients for hospital procedures and operations.

Dr Griffiths, who is speaking on "Needle phobia and the art of hypnotic suggestion" at the annual scientific meeting of the Australian and New Zealand College of Anaesthetists (ANZCA) in Sydney on Thursday May 10, is one of a small but growing number of anaesthetists who use hypnosis, relaxation techniques to help patients combat their fear of needles.

"We're finding that guided relaxation can facilitate induction of anaesthesia and it's important that we use positive language to avoid inadvertently increasing pain or anxiety in our patients," Dr Griffiths explained.

"Being able to influence our patients' experiences by choosing our words - and the way we say them - is becoming more recognised by anaesthetists and there is evidence that formal hypnosis and guided relaxation can be beneficial."

"Patients who are needle phobic often receive sedation in the form of an anaesthetic gas before the needle goes in.

Sometimes this is entirely appropriate. However, if we do this unquestioningly, it may serve to reinforce to the patient that they can't tolerate having needles. It may represent a missed opportunity to help the patients learn techniques to address and cope with their fears. Also some techniques, such as epidurals for labour pain relief or spinals for caesarean delivery need to be done with a needle, gas isn't really an option".

Dr Griffiths also encourages trainee anaesthetists and theatre staff at the Royal Women's Hospital to use calming and positive language with patients to avoid anxiety and stress. For example, instead of saying "here comes the big sharp needle, this will sting" phrases such as "here's the anaesthetic and it will make the skin numb and make you feel more comfortable" can help reduce anxiety and discomfort associated with procedures.

According to research published in the British Journal of Anaesthesia in 2014 needle phobia affects between 3.5 and 10 per cent of the population. Needle phobia often starts in childhood either through an association with a close relative who has a similar fear of needles or a medical experience which highlights that "needles plus doctors equals pain and distress."

"People often develop phobias from sad or traumatic experiences in early life," Dr Griffiths explained. For example, childhood leukaemia, epilepsy or even the death or illness of a loved one can trigger anxiety related to needles.

Patients who are needle phobic may in fact be unaware, or have no recollection, of the triggering event.

"We certainly do see some extreme cases of needle phobia," he said.

“Needle phobia may lead to avoidance behaviour where patients delay (or avoid altogether) seeking health care.

This is also commonly seen in dental phobia. Needle phobia has even been attributed as a cause of death in 23 documented cases of patients refusing life-saving treatment because of the anxiety of a blood test or a cannula insertion.”

Dr Griffiths is hoping to develop new research projects that examine how the use of language can influence patient comfort and the role of hypnosis in improving patient experiences.

More than 2500 local and international anaesthetists, pain specialists and other medical practitioners have gathered for the ANZCA annual scientific meeting at the International Convention Centre in Sydney from May 7-11.