

The darker side of online health searches

In the digital era, the Internet has become the primary source of health-related information.

Concern regarding one's health is normal. However, excessive and repetitive searching for online health information can increase anxiety instead of relieving it. This is cyberchondria, an illness of the digital era. The term was first used, probably in *The Wall Street Journal* in 1999.

Multiple articles, videos and opinions are available within seconds. But the authenticity of many sources is questionable. However, about 72% of internet users search for and depend on online health information. This is probably a darker side of the digital revolution.

There is increased fear and uncertainty about health. Symptoms of various diseases are incorrectly interpreted. An obsession with having a serious illness is a problem.

A 30-year-old man was having a severe headache on the left side with occasional vomiting. On repeated online searches, he self-diagnosed the condition as a complex brain tumour. He was devastated. When his family members forcibly took him to a neurologist, he was diagnosed with migraine, a common condition that is not life-threatening.

Among internet users, a prevalence of cyberchondria of up to 55.6% has been reported in India.

It is an emerging public health concern, particularly over the past decade. Artificial intelligence has added a new dimension to this problem by making health-related information more accessible.

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HEALING POTION

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AI can complement but not replace clinical judgment. Cyberchondria is more common among young people below 35 years of age. They are very familiar with the Internet and have greater exposure to it.

The reason why many people depend more on online health information is not limited to the digital revolution. Many other reasons exist:

- High and increasing cost of medical care
- Difficult accessibility to healthcare. Questions exist regarding the authenticity of some healthcare facilities
- Reduced trust in physicians and deterioration of the doctor-patient relationship
- Disappearance of family physicians in the neighbourhood who could provide dependable advice

In contrast, internet accessibility is easy and mostly free. There is also easy avail-

ability of medications without valid prescriptions.

There are public health implications of cyberchondria. In cases of illness, cyberchondria can cause a delay in treatment. There is an increase in cost as the disease advances. Some additional investigations may need to be done. Repeated consultations may also be necessary.

Usually, there is a trigger factor when a new symptom develops. Online health information is accessed in search of reassurance. Unfortunately, it becomes difficult to stop searching. Multiple searches generate conflicting and alarming information. Relief is short-lived, prompting another search. Health concerns increase, and the mental crisis deepens.

The brain has a threat detector called the amygdala. It plays a central role by amplifying emotional responses to health-related informa-

tion. An online search can trigger a disproportionate fear response.

Many mental health issues are associated with cyberchondria. Health-related anxiety and an inability to tolerate uncertainty are problems. Repetitive checking behaviour is associated with obsessive-compulsive disorder.

Cyberchondria is not a psychiatric condition, but many sufferers experience depression. Some avoid social functions. There can be deterioration in relationships. Conflict with a partner is also possible.

Sleep disturbances have been reported, and there can be a downward slide in academic performance. There is an increase in confusion and poor time management.

Technological factors such as smartphone addiction and repeated online searches are common.

The Cyberchondria Severity Scale, which evalu-

ates 12 issues, can assess the extent of the problem.

There is a tendency for people to confirm their preconceptions or hypotheses through repeated online searching. This is called confirmation bias.

Based on online searches, there can be self-diagnosis and self-medication without any legitimate prescription. This is common in Calcutta. Though it may cut down the cost of treatment, it is dangerous. Various adverse reactions have been reported. Self-medication for headaches, fever, coughs and colds is common.

Cyberchondria can be difficult to diagnose and treat in some cases. Nobody should be discouraged from seeking online health information. Instead, digital literacy should be promoted.

Credible medical sources, such as government websites or research organisations, must be consulted. Health professionals also need to adapt. Blaming individuals cannot be a solution.

Medical problems need to be identified and treated. Misconceptions must be addressed with empathy and compassion. People must be helped to tolerate uncertainty.

For those who cannot resist repeated online searches on smartphones, there is a suggestion. They can change their settings to "grayscale". Studies have shown that a black-and-white screen devoid of colour can significantly reduce screen time.

The internet cannot assess economic status, disease biology and individual needs. Neither can it take responsibility. Thus, it cannot offer personalised care without human intervention. Clinical experience and moral judgment are also crucial.

Some online searches can be useful, but an attentive conversation between a patient and a clinician cannot be replaced.