



Needle Phobia

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Fear of Needles (Belonephobia)

- An unreasonable and altered response due to the fear of needles.
- Recognized as a DSM-5 (Diagnostic and Statistical Manual of Mental Disorders) diagnosis – assigned to individuals who suffer from intense fear or anxiety when exposed to specific objects or situations.
- 2017/18 ICD-10-CM Diagnosis code F40.9 Phobic anxiety disorder, unspecified.



Prevalance

- 1 in 10 people have a needle phobia.
- But why?
 - Negative experience when they were very young.
 - Fear developed because someone close to them has had a bad experience or is phobic themselves.
 - Vasovagal response to seeing needles. Accounts for half of people with a needle phobia.



Hemodialysis Needle Fear – It's real!

- Anyone could expect to be frightened by the size of hemodialysis needles.
- Dialysis patients have more than 300 opportunities a year to feel pain from needle cannulation on two access sites three times a week.
- Not only do these patients endure the pain of cannulation, but they have 2 giant inflexible metal needles stuck in their arms for generally 4 hours at a time.



Hemodialysis Needle Fear – It's real!

(Cont)

- The technician or nurse responsible for inserting needles is always changing. Some are better than others and there is no control over who inserts the needles. And they always seem like they are in a hurry and/or distracted.
- Watching other patients in the unit with very vocal and physical reactions to having their needles inserted.



Symptoms of Anxiety

- Breathlessness
- Excessive sweating
- Nausea or stomach distress
- Dryness of mouth
- Irritability
- Shaking/trembling
- Heart palpitations
- Inability to speak or think clearly
- A sensation of detachment from reality
- Fear of fainting
- Fear of losing control



Vasovagal Response

- Individuals with high levels of needle fear or blood-injection-injury phobia have an increased risk of a vasovagal response (fainting).
- The vasovagal reflex is an involuntary response of the body
 - Increase in blood pressure and heart rate followed by an over compensatory, precipitous decrease in blood pressure and heart rate. This will lead to reduced cerebral blood flow and eventual loss of consciousness (fainting)

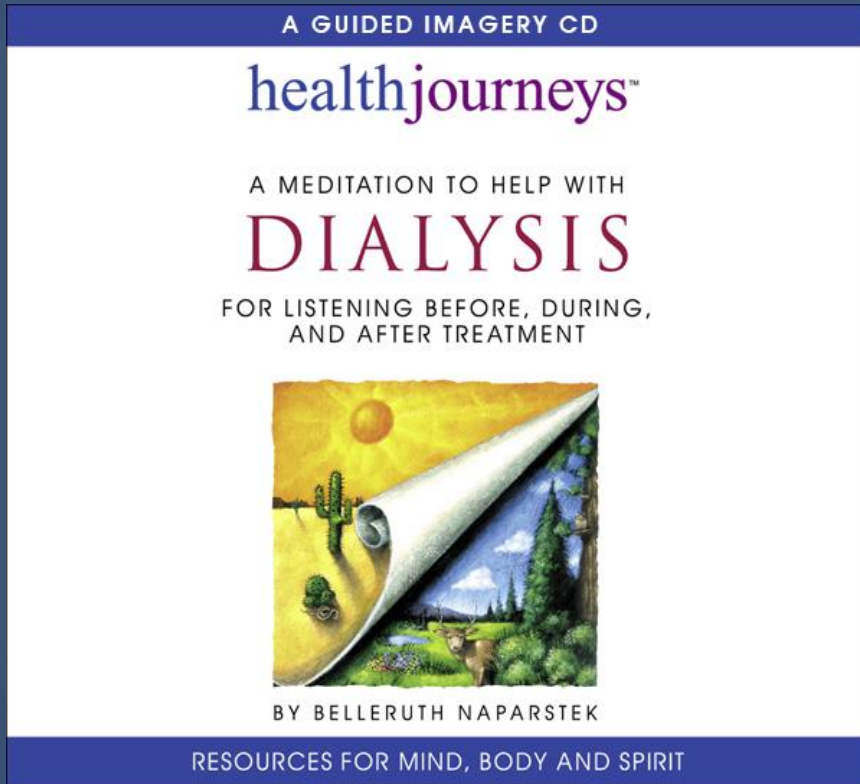


Coping Strategies

- Meditation
- Distraction Techniques
- Cognitive Coping Strategies
- Using Imagery
- Relaxation Techniques
- Breathing for Relaxation
- Applied Muscle Tension
- Develop a Hierarchy to Face Your Fear
- Therapy – Desensitization
- Pain Control



Coping Strategies - Meditation



“Guided Imagery – A holistic, mind-body therapy consisting of healing words and images. This immersive, hypnotic, calming guided imagery for dialysis provides a sense of peace, control and mastery while undergoing treatment. Words and music combine to put dialysis and associated therapies in a more positive light.”



Coping Strategies

- Distraction Techniques
 - Listening to music
 - Reading a book or magazine
 - Focusing on something on the wall
 - Watching the clock
 - Humming a tune



Cognitive Coping Strategies

- Reassuring yourself and challenging negative thoughts. Put the negative and unrealistic anxious thoughts to the test.
 - Is there any evidence that contradicts my thoughts?
 - I have survived previous blood tests before even though I was anxious.
 - I have often felt more anxious when I was waiting than when I've had my blood drawn or the needle inserted.
 - What would you say to a friend who has this fear?
 - Remind them about how they have coped in the past and how nothing bad has happened.



Coping Strategies

- Using Imagery
 - Think about a time in the past when they have felt really good and calm. (e.g. a place that is very relaxing, or being with a person they love or feel safe with)
 - While creating a picture in your head – try and recall the smells that were around, the sounds you heard, anything you felt at the time, and the thoughts you had.



Coping Strategies

- Relaxation Techniques
 - Deep breathing and muscle relaxation techniques
 - Get more information from physiotherapists or psychologists
 - There are relaxation tapes and books available - check the local library or bookshop



Coping Strategies – Breathing for Relaxation

- Sit in a comfortable position. Keep your back upright but not stiff.
- Relax your shoulders and jaw.
- Put one hand low down on your belly.
- Take a long, slow, deep, gentle breath in through your nose and out through your mouth.
- Try to breathe right down into your belly, but don't force it.
- Just let your body breathe as deeply as is comfortable for you.



Coping Strategies

- Applied Muscle Tension – a physical technique
 1. Recognize prodromal signs of impending vasovagal syncope (e.g., visual disturbances, feeling dizzy, or clammy)
 2. Tense muscles (e.g., abdominal, legs, arms) to raise their blood pressure and combat the vasovagal response
 3. Keep tensing muscles for 10-20 seconds, or until your face feels warm.



Coping Strategies (Cont)

4. Then slowly relax – but not all the way – until each needle is in.
 5. Apply the technique when problem symptoms occur.
- This technique becomes “applied tension” when it is practiced while being exposed to the object of fear.



Develop a Hierarchy

- Develop a list of all of the situations related to needles that is feared. Arranged in the order of difficulty. It can include procedures, photographs of the procedures, viewing the procedures on video or in real life, and personally experiencing them.

Example:

Situation	Distress Rating
Insertion of a dialysis needle	10
Touching the dialysis needle	9
Watching another patient be cannulated	8
Watching a cannulation on Youtube	7
Looking at photos of injections	6
Listening to someone talking about having an injection	6
Thinking about having an injection	5



Therapy

- Desensitization – slow exposure to the fear (in this case, needles) in a safe setting. The theory is that over time, the needles will lose their power of causing fear.
 - Medicare or other health plans may pay, since needle fear is in DSM-IV.
 - Medicare Part B will pay for “outpatient mental health services in an office or your home, from a qualified: Psychiatrist, Clinical Psychologist, Clinical social worker”



Kill The Pain

- Part of the fear is related to pain. If a patient doesn't feel the stick, the vasovagal reflex may not be triggered.
 - Creams containing lidocaine numb the skin and contain an ingredient that numbs below the top layer of skin. Apply 60-90 minutes prior to the needle stick. Cover the spot with a tegaderm dressing or self-sticking plastic wrap.
 - EMLA (AstraZeneca) – cream or patch with 2.5% lidocaine. Requires a doctor's prescription.



And Lastly...

Avoid needles!

Explore the patient's option for
CAPD or CCPD







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