



Cyberchondria

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PENGANTAR

1. Pengaruh Internet → Revolusi **Dunia Kesehatan**.
2. Dengan adanya INTERNET, individu dapat **memperoleh informasi selengkap-lengkap**nya mengenai suatu **penyakit, gejala dan juga intervensi** yang dilakukan; melakukan **diagnosis mandiri** dan memperoleh **dukungan online** terlepas dari **waktu** atau **lokasi** (Pullman & Taylor, 2012)
3. Pertanyaannya:
 - “Apakah informasi mengenai penyakit tertentu (gejala dan intervensinya) adalah VALID?”
 - “Apakah SELF-DIAGNOSIS yang dilakukan oleh orang awam diperbolehkan?”
 - “Apa dampak dari perilaku SELF-DIAGNOSIS terhadap kondisi psikologis seseorang?”

Types of Deception Regarding Health

01

Malingering

(1) pure malingering in which the individual falsifies all symptoms; (2) partial malingering in which an individual has symptoms but exaggerates the impact they have on daily life; and (3) false imputation

02

Factitious Disorder and Munchausen Syndrome

03

Munchausen Syndrome by Proxy and Fabricated or Induced Illness

Selanjutnya, disebut dengan **Factitious disorder**

O4. Munchausen by Internet and Munchausen by Proxy by Internet

- The DSM-5 masih dalam proses mereview gangguan ini, meski tidak menyebut sama sekali mengenai istilah "Munchausen by Internet"
- Kendati demikian, DSM-5 menyebut Factitious Disorder (FD) memiliki dua subtype yang diusulkan:
 - (1) gangguan buatan yang dikenakan pada diri sendiri dan;
 - (2) gangguan buatan yang dikenakan pada orang lain (**Factitious disorder imposed on another**)
- Kasus-kasus baru Munchausen oleh Internet diidentifikasi secara berkala → menggunakan format online untuk FD, termasuk penerapan beberapa persona dan waktu serta upaya yang banyak dikeluarkan untuk membuat identitas dan kondisi palsu yang kompleks dan dramatis (Cunningham JM, Feldman MD, 2011)

Munchausen by Internet

- MBI ini juga bisa dilakukan oleh orang-orang yang TIDAK bertanggungjawab (**Factitious disorder imposed on another**), dengan ciri-ciri “postingan” seperti :
 1. Posting yang secara konsisten menduplikasi materi di posting lain, buku, atau situs web terkait kesehatan.
 2. Ciri-ciri penyakit yang diduga diilustrasikan dengan karikatur.
 3. Serangan penyakit yang hampir fatal bergantian dengan penyembuhan ajaib.
 4. Klaim fantastis, dibantah oleh posting berikutnya, atau dibantah habis-habisan
 5. Ditemukan tulisan di website lain dengan GAYA penulisan yang sama

(Taylor & Pullman, 2012)

CYBERCHONDRIA

Cyberchondria → kondisi yang terjadi ketika seseorang memiliki pikiran berlebih atas **kondisi kesehatan** mereka, lalu mereka mencari (*surfing the internet*) mengenai **gejala** suatu penyakit, dan berujung pada **MENDIAGNOSA DIRI SENDIRI**.

Cyberchondria refers to an abnormal behavioral pattern in which excessive or repeated online searches for health-related information are distressing *or anxiety-provoking*. (McMullan, Berle, Arn´aez, Starcevic, 2018)



Serba-Serbi Cyberchondria

1. Kecemasan terhadap kesehatan telah ditemukan berkaitan dengan pencarian informasi kesehatan online dan cyberchondria
2. Tidak dapat dipungkiri, akses informasi kesehatan online memiliki manfaat potensial selama dapat “mendidik orang mengenai sifat/karakteristik, penyebab, pencegahan, dan pengobatan kondisi kesehatan tertentu.
3. TAPI... Namun, bagi beberapa orang yang tertekan atau cemas dengan kesehatannya, internet dapat diakses untuk tujuan mendiagnosis diri atau mendapatkan kepastian → BAHAYA (White & Horvitz, 2009).
4. Distres dan kecemasan terhadap kesehatan (*health anxiety*) bisa menjadi motivator utama untuk mencari informasi kesehatan secara online.
5. Mencari informasi kesehatan secara online tanpa adanya kecemasan yang signifikan dapat menjadi AWAL dari kemunculan kecemasan terhadap kesehatan.

CYBER + HYPOCHONDRIA



A dark, stylized illustration of a man lying in bed, looking extremely anxious or stressed. He is wearing a smartwatch on his left wrist and a red wristband on his right. A smartphone with a red heart icon is on a bedside table. The scene is dimly lit, suggesting a night or a dark room.

Cyberchondria expresses the increasing **health anxiety** as a result of **repetitive and excessive** search of health-related information on internet.



Mitos atau Fakta??

cyberchondria and online health
information seeking are just the
same thing

Cyberchondria and online health information seeking are just the same thing → Myths

Cyberchondria not only refers to online health information seeking, but involves excessive searches that are driven by and/or lead to distress and anxiety

Lying on a continuum of behavior, online health information seeking and cyberchondria have different aims (learning about a condition versus relieving anxiety about a condition)

While online health information seeking is not in and of itself “maladaptive”, cyberchondria involves spending an excessive amount of time online (to the expense of more productive activities) and experiencing an increase in anxiety after searching



SIGN OF CYBERCHONDRIA

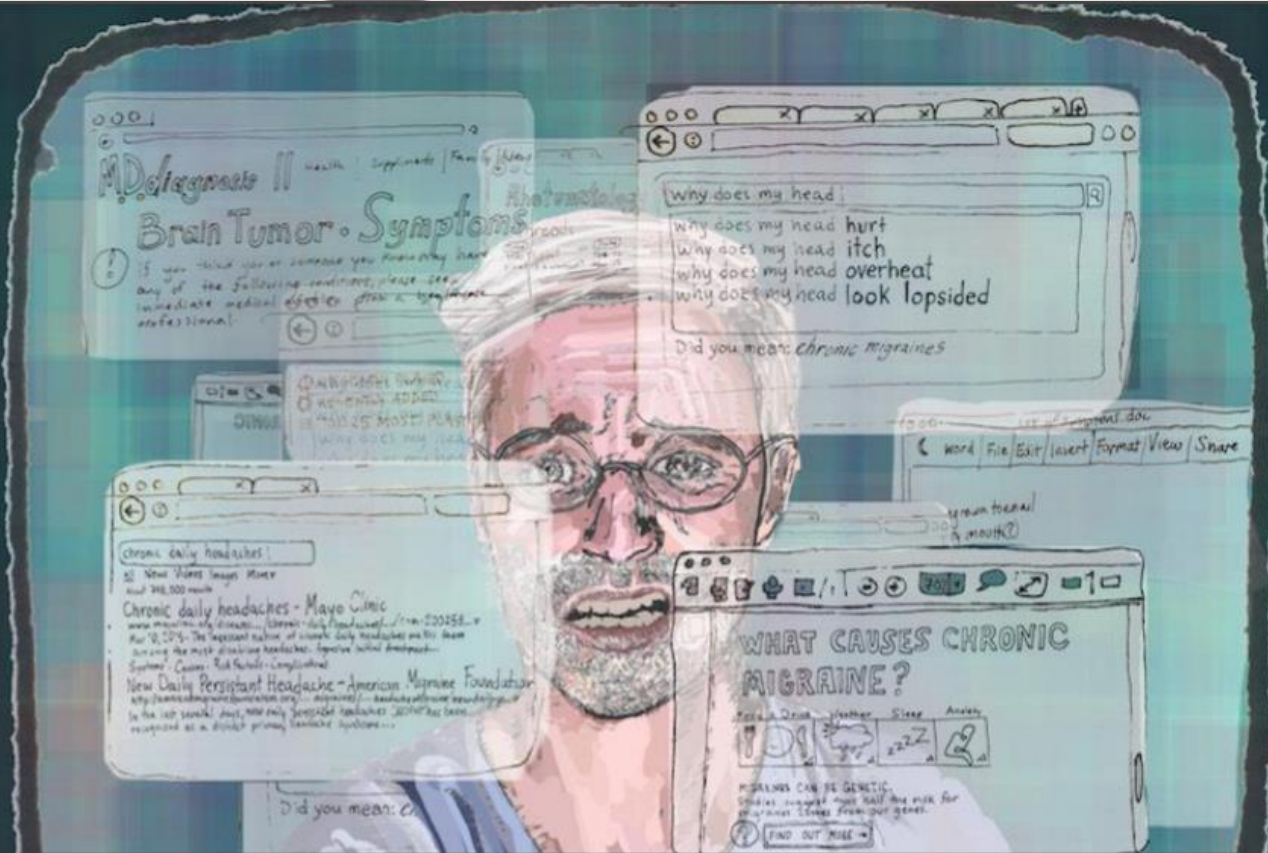
Apa saja ciri-ciri orang yang
mengalami cyberchondria?

01

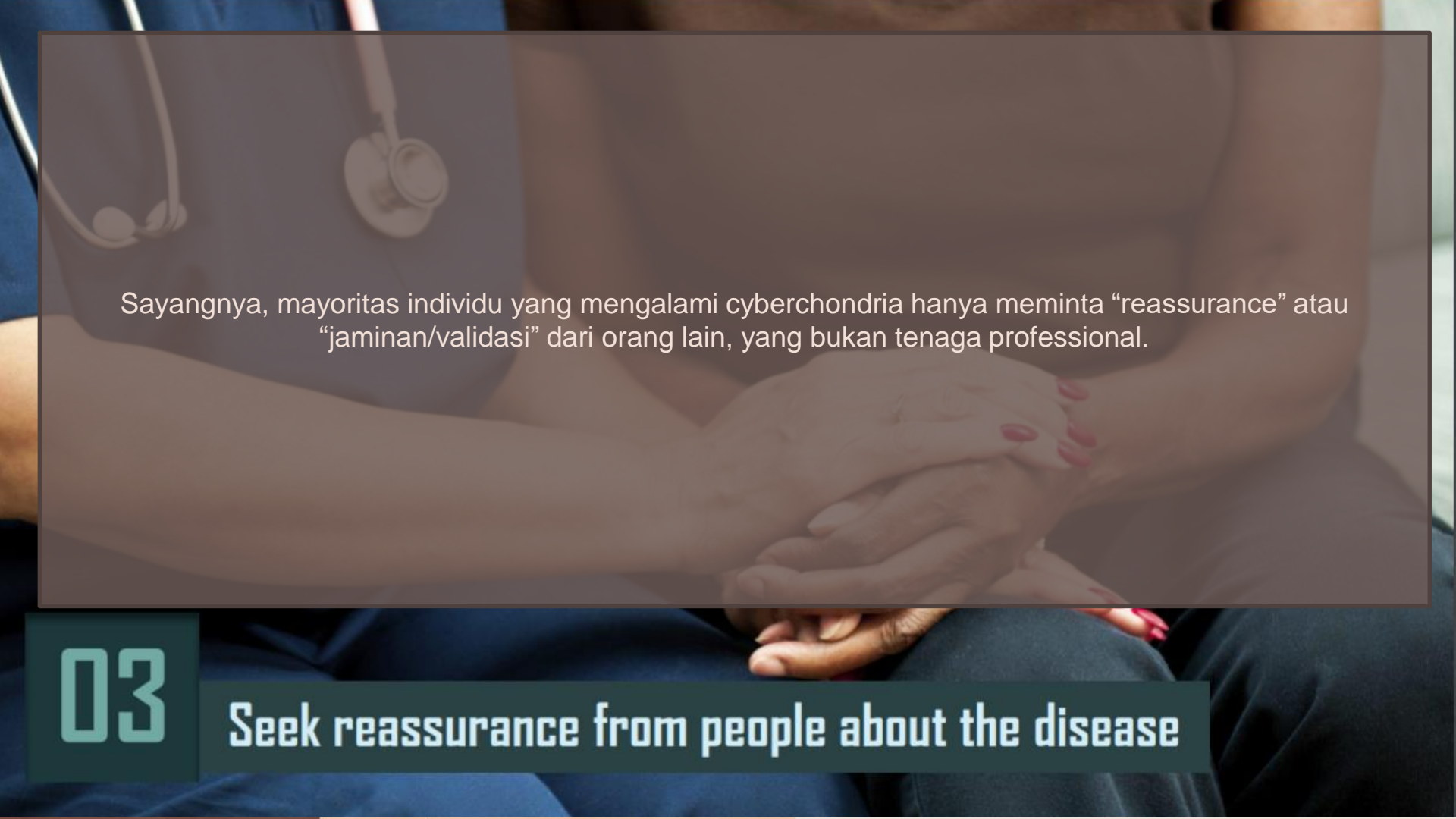
Checking health information websites
to get relief from anxiety



02



The times that spend checking health symptoms
online are interfering with your life



Sayangnya, mayoritas individu yang mengalami cyberchondria hanya meminta “reassurance” atau “jaminan/validasi” dari orang lain, yang bukan tenaga profesional.


03

Seek reassurance from people about the disease

SYMPTOMS OF CYBERCHONDRIA



- > Focus on worst-case scenario
- > Diagnose & mislead others
- > Contact your doctor frequently
- > Pulse skyrockets when "symptom surf"
- > Takes over your life



Apa saja Faktor
Penyebab
Munculnya
Cyberchondria?

Faktor Penyebab Munculnya Cyberchondria (Starcevic, Schimmenti, Billieux, dan Berle, 2020)

1

A heightened perception of Threat and fear of a newly identified and poorly understood disease

2

Difficulty in coping with Uncertainty associated with the pandemic

3

lack of authoritative and Trustworthy sources of relevant health information

4

difficulty in coping with abundance of information that is often confusing, conflicting, unverified and constantly updated, along with a decreased ability to filter out unnecessary information

5

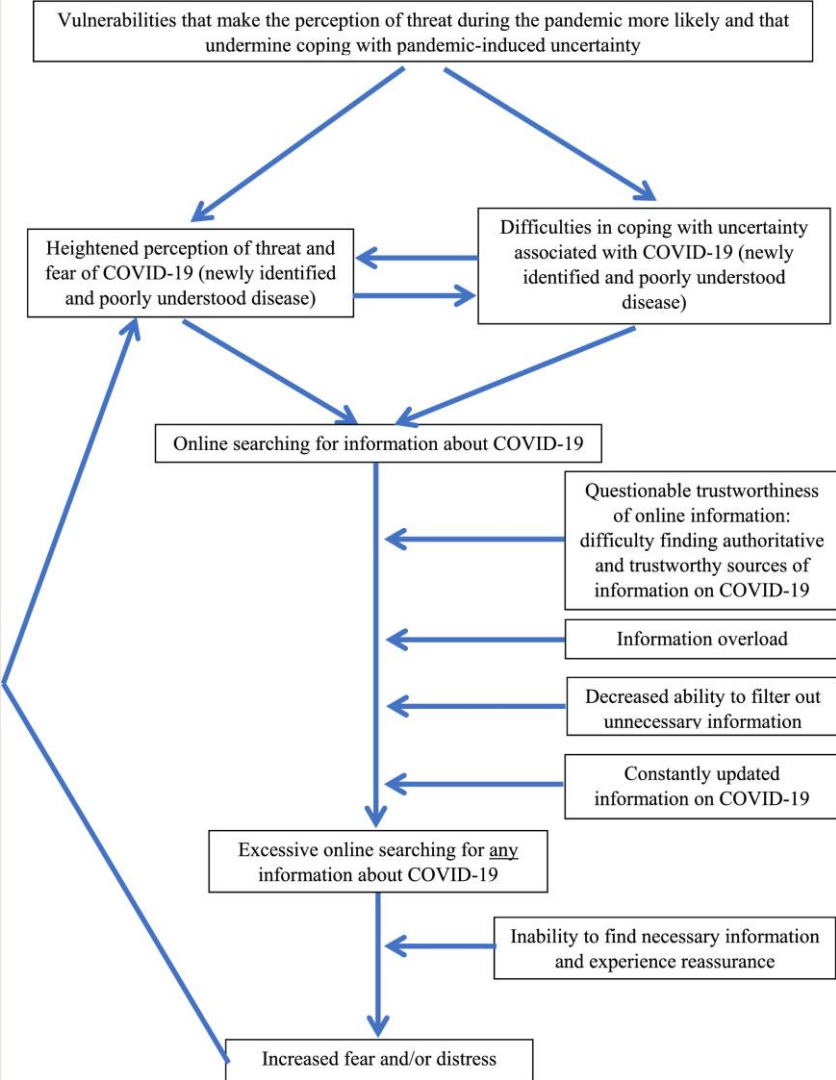
inability of excessive online health information seeking to provide the necessary information and deliver reassurance.

DAMPAK PERILAKU CYBERCHONDRIA

- Vismara dkk (2020) melalui systematic review of Cyberchondria menyimpulkan bahwa perilaku cyberchondria ini memiliki peranan penting (*significant role*) terhadap peningkatan kecemasan (health anxiety), distress, dan perilaku obsesif-kompulsif.
- McMullan, Berle, Arn´aez, Starcevic (2018) juga dalam systematic review mengenai cyberchondria menyimpulkan:
 - a. Medium relationship between health anxiety and online health information seeking
 - b. Strong relationship between health anxiety and measures of cyberchondria
 - c. Age moderated relationship between health anxiety and cyberchondria
- Beredarnya informasi yang tidak valid, tidak bisa dipertanggungjawabkan, namun semakin dipercaya khalayak umum → menimbulkan kecemasan (Pullman & Taylor, 2012)
- Munculnya support group yang tidak bertanggungjawab yang hanya berorientasi pada kebutuhan finansial (Pullman & Taylor, 2012)

Cyberchondria in the time of the COVID-19 pandemic

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Model of cyberchondria during the COVID-19 pandemic: components, explanations, and corrective strategies

Components

Difficulties in coping with uncertainty

Explanations

- Uncertainty is one of the hallmarks of the COVID-19 pandemic because COVID-19 is a newly identified and poorly understood disease.

Corrective strategies

- Learning to manage uncertainty, that is, accepting the limitations of medical knowledge, which would allow people to live with unavoidable uncertainty and prevent futile online searches.

(Starcevic, Schimmenti, Billieux, dan Berle, 2020)

Model of cyberchondria during the COVID-19 pandemic: components, explanations, and corrective strategies

Components

Questionable trustworthiness of online information, including the negative role of social media

Explanations

- Large amount of online information on COVID-19 is misleading, inaccurate or false.
- Sources of health information that are usually regarded as reliable may not be perceived as authoritative and trustworthy when it comes to COVID-19, because so little is known about COVID-19; however, such sources remain most reliable during the COVID-19 pandemic
- Various social media have been implicated in a “pandemic of misinformation” during the COVID-19 pandemic.
- Perception of social media as a trustworthy source of COVID-19-related information is likely to intensify searches for more information and increase a sense of confusion and distress, thereby contributing to cyberchondria during the pandemic
- Individuals who use social media as their main source of information during the COVID-19 pandemic tend to suffer from more information overload and exhibit a more prominent cyberchondria.

Corrective strategies

- Fostering acceptance that some proportion of online health information cannot be trusted.
- Increasing reliance on the official and reputable sources of online health information, despite their limitations.
- Avoiding social media as the only or predominant source of online health information
- Encouraging efficient self-control strategies when social media are used (e.g., limiting duration of exposure and the number of links followed)

Bagaimana Upaya Menanggulangi Perilaku Cyberchondria



Hindari Cemas
Berlebih



Menyadari bahwa
tidak semua informasi
di Internet adalah
VALID



Konsultasi dengan
Profesional
(Dokter/Psikiater,
Psikolog)



BATASI waktu
penggunaan internet

McMullan, Berle, Arn´aez, Starcevic (2018)

Savino and Fordtran [2006] Hal-Hal yang bisa dilakukan Tenaga Profesional untuk Membantu “Pola Pikir” orang-orang yang Mengalami Cyberchondria:

1. Menyampaikan kekhawatiran terhadap perilaku individu dengan non judgemental
2. Dukung kecurigaan dengan fakta.
3. Berikan komentar yang berempati dan menyelamatkan.
4. Hindari pemeriksaan untuk mengungkap perasaan dan motivasi yang mendasari pasien untuk meminimalkan gangguan pertahanan emosional yang penting bagi fungsinya.
5. Yakinkan pasien bahwa hanya mereka yang perlu tahu yang akan diberitahu tentang kecurigaan penyakit.
6. Pastikan staf menunjukkan penerimaan berkelanjutan terhadap pasien sebagai orang yang layak mendapatkan bantuan mereka.
7. Menyarankan bantuan psikiater, tapi jika pasien menolak jangan dipaksakan.

TIPS to avoid cyberchondria



Internet

Use the Internet as a tool, not a substitute



Websites

Visit trustworthy and secured websites



Apps

Be careful with the use of mobile apps



Please Watch This Video

<https://www.youtube.com/watch?v=CY2i5eGF7Q0>

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THANKS

Do you have any questions?
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or discuss it via googleclassroom

