

Thomas Fogh Vinter

# **UNDERSTAND ANXIETY**

## **To let it go**



## **Light version**



**Misinterpretation theory vs. Disease theory**

**The six main causes of anxiety**  
**Introduction to proper anxiety management**  
**Step by step guide to freedom from anxiety**

**Teaching, school and self-help book**

**Publisher: [Generation-Anxiety.com](http://Generation-Anxiety.com)**

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# UNDERSTAND ANXIETY – Light version!

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*How to Avoid Anxiety in Your Life.*

*Light version of the original book: Understanding Anxiety to Let It Go.*

**Publisher: Generation-Anxiety.com**

**Co-Publisher: The Truth About Anxiety**

## **Disclaimer and Information about the Book**

This book is an informative and educational resource on anxiety and is not intended to replace professional medical advice, diagnosis, or treatment. It is always recommended to follow your doctor's recommendations and, if necessary, seek professional help from psychologists or psychiatrists.

The book does not deal with anxiety related to somatic diseases or disorders.

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### **About Generation-Anxiety.com**

**Generation-Anxiety.com is a non-profit NGO that works voluntarily and without compensation to assist individuals with anxiety worldwide. Our mission is to make anxiety treatment free and accessible to everyone, as we view anxiety as a societal issue that affects more than 10% of the global population as well as their families. This requires a rethinking of effective treatment methods.**

The book is free for individuals as well as private associations and their members.

Schools, professionals, and institutions can acquire affordable licenses based on the number of users.

### **About the Book**

A textbook on anxiety with a clear purpose: to help those suffering from anxiety overcome irrational fears through rational thinking about their irrational anxiety.

The book does not take a position on specific treatment methods or their effectiveness. It is based partly on scientific principles and partly on the author's 45 years of personal experience with irrational anxiety.

All content has been developed and conceived by Generation-Anxiety.com and is unique to this book.

### **Fact Check and Use of AI**

To ensure accuracy and evidence-based content, the book has been fact-checked using OpenAI's training data, which includes millions of articles on anxiety. Only a few text analyses were performed using artificial intelligence (AI). No AI can write objectively about anxiety.

## **Defining the Focus of the Book**

This book focuses exclusively on the subsequent anxiety, i.e., the anxiety that arises as a consequence of the initial misinterpreted anxiety experience.

The book focuses on the fear of anxiety itself, and the avoidance behavior and persistence that accompany it.

## **Who is the book for?**

This book is for those who wish to become free from anxiety and for professionals who want to provide their patients with multiple possible paths to freedom from anxiety, as well as for all those who have not experienced the desired effect of recognized treatment methods.

## **Repetition and Learning**

Repetitions occur throughout the book as they emphasize important points. Repetition is a fundamental part of learning, especially in the context of reducing anxiety. It is crucial to understand the text in its full context during the initial reading. Therefore, I ask for your patience with the repetitions, even if they may seem redundant – they serve an important purpose. They are there to assist in becoming free from anxiety.

## **Language and Expression**

As I am not a professional writer, there may be errors in language, writing style, and phrasing. I hope the message still comes across clearly.

Welcome to a world characterized by deceit, lies, avoidance, retention, discomfort, and misunderstandings.

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Perhaps you've wondered why you haven't become free from anxiety yet? It might be relevant to look at the anxiety disease model, which tells us that we are ill. That anxiety is genetic or a chemical imbalance in the brain. That anxiety is complicated and requires treatment.

If we, purely hypothetically, pose the question: What if you aren't actually ill? Could this explain why you haven't become free from anxiety? Is it possible that the disease theory inadvertently keeps us trapped in anxiety rather than helping us overcome it? Does the disease theory still hold today, 60 years after its development, with all the new knowledge we have gained on the subject since then? Why haven't our assumptions about the cause of anxiety evolved over the years, just as they have in most other medical fields? Are we, in this way, victims of old assumptions, or is the answer entirely different regarding the disease theory?

**Let's examine that.**

We start by reviewing topics that are never discussed in relation to irrational anxiety.

## **Understanding Irrational Anxiety: A Journey to Freedom**

How can we prevent irrational fear from controlling our lives? This book takes you on a journey through the essential insights that can help you overcome the grip of anxiety. Here, we focus on anxiety that arises without a visible cause and leads to fear of the fear itself – not anxiety associated with trauma, biological factors, or other mental disorders such as PTSD or OCD.

We start by reviewing topics that are never addressed in the context of irrational anxiety.

## **Introductory Story**

### **Alex's Story**

Alex wakes up with a jolt. His heart is pounding, and he's gasping for breath. Again.

"It's 'just anxiety,' the doctor often says. But why does it feel so overwhelming? Why does it feel as if the body is about to explode if it's only psychological? Alex has been struggling for years. He has tried medication, therapy, mindfulness, exposure, and meditation. Some helped a little, others not at all. But the anxiety always returned. 'I've tried everything,' he thinks. 'Maybe I just have to learn to live with it...'"

## **A New Perspective**

One day, his doctor suggests something different. Not a new treatment or a new pill, but a new understanding. A book that presents a radical idea: Anxiety is not a disease. Anxiety arises when we misinterpret the body's own chemical reactions. Alex is skeptical. It almost feels like his experience is being trivialized. But he starts to read – and suddenly, something makes sense.

Anxiety doesn't arise out of nowhere. There is always a trigger. It begins with a physical sensation, perhaps dizziness. Then comes the misinterpretation: "Something is wrong!" At that moment, anxiety chemicals are released in the body because the thought "Something is wrong!" alarms the amygdala. Chemicals like adrenaline, noradrenaline, and cortisol now create intense discomfort. Then follows the second misinterpretation: "I am going to die now." This thought releases even more chemicals, as the amygdala tries to save you from the danger it believes you are in. But you are not about to die; you are simply experiencing the body's natural, though unpleasant, anxiety chemistry. A moment later, you experience a panic attack due to all the released chemicals. After a few minutes, it's suddenly all over. What happened? And then the fear that it will happen again arises, because the experience is stored in the memory as something to be avoided—and so the fear of anxiety begins.

Alex continues reading: You are not sick. You are simply caught in a biological alarm that reacts to both reality and your thoughts.

## **A new way to respond.**

Alex begins to change small things. When anxiety hits, he says, "Okay, my body is reacting. It's just my body's chemistry that I'm feeling. Therefore, it's not dangerous." He starts taking short walks and calmly talks to himself: "I'm not ill, it's just body chemistry." And it works. Not like a miracle cure. Not in one day. But gradually, the anxiety loses its power. Not because it disappears, but because Alex is no longer afraid of it. He now knows that it's his own body's chemistry challenging him, not a disease. He has learned that anxiety is chemistry – not a disease. That discomfort is chemistry – not a disease. It's not about controlling the anxiety, but about unlearning misinterpretations.

## **That's Why It Works**

It's not about "pulling yourself together" or thinking positively. It's about understanding what really happens when you experience symptoms of anxiety – and starting to react differently. Ideally, it's best to completely avoid triggering anxiety symptoms. This is achieved by knowing and being aware of the process behind the symptoms. Understanding that it's just harmless chemistry. It only becomes uncomfortable when we misinterpret it. Without misinterpretation, we can continue living without issues. And fortunately, most people do.

Alex's story is not unique. It is the story of thousands of people who believed they were ill – but in reality, they simply lacked the right explanation.

## **Rational vs. Irrational Fear**

It is important to distinguish between rational and irrational anxiety. Rational anxiety is a natural and healthy reaction that protects us from real danger. For example, if you are standing on a highway and hear a car approaching, it is rational to feel scared and move away. Irrational anxiety, on the other hand, arises without any real threat and can feel overwhelming because the body reacts as if there is danger, even though there isn't. When we talk about anxiety in this book, we are referring to this irrational form.

## **Two Types of Irrational Fear**

Irrational anxiety can be divided into two main categories: reinforcing and external. Reinforcing anxiety occurs when we amplify the anxiety through our thoughts and behaviors. External anxiety is triggered by something external, which is not dangerous in itself, such as a situation or a sound. Reinforcing anxiety often involves the fear of the anxiety itself: "What if I faint?" External anxiety can be more situation-specific: "I can't take the bus." In this book, we focus on reinforcing anxiety, which is often seen in panic disorder and social anxiety.

## **The First Experience of Anxiety**

The first experience of anxiety can be intense and unexpected, often triggered by a misinterpretation of the body's signals, which leads to subsequent anxiety symptoms. This initial misinterpretation of anxiety symptoms leads to the ensuing anxiety, which holds us captive because we fear the repetition of the unpleasant feeling. This fear creates a pattern where memory constantly recreates anxious thoughts, which we misinterpret, further amplifying the anxiety. To break this cycle of anxiety, we must "erase" this memory of past anxiety discomfort. Without that memory, all anxious thoughts will also cease.

## **Anxiety is Not a Disease**

Traditionally, we have treated anxiety as a disease, but this is a misunderstanding. When we experience something unpleasant, we often seek medical help, but irrational anxiety is not a disease that can be "fixed" with medication. It is a condition that requires insight and understanding. Genetics, brain chemistry, and social conditions can influence our experience of anxiety, but they are not the causes. It is our reactions to the body's signals that determine whether anxiety becomes a problem.



It is important to understand that irrational fear is not a disease, but a misinterpretation of the body's signals and symptoms. By changing our understanding and reactions, we can learn to manage and release the influence of anxiety on our lives.

For anxiety to become a problem, it requires more than just illness. Illness can trigger various bodily signals, but it is our misinterpretation of these signals that creates anxiety, independent of the illness itself. The challenge lies in the fact that everything happens so quickly that we cannot distinguish between bodily signals and symptoms of anxiety. Therefore, it can feel as though the symptoms of anxiety arise out of the blue. But this is not the case. There is always a misinterpretation that precedes the chemistry and symptoms of anxiety.

**Since the dawn of time, irrational anxiety has been a challenge due to the discomfort it causes. The problem with irrational anxiety is that its symptoms feel like genuine illness symptoms. Previously, it was not understood that the discomfort was due to the body's natural chemical reactions, such as adrenaline and cortisol, and thus, there is nothing actually disease-related about it. Earlier theories from the 1960s viewed anxiety as a mental disorder with genetic causes and brain imbalances, but in the 1980s and 1990s, we gained a better understanding. Unfortunately, the healthcare system has not changed its perception, and many still cling to the old theories out of habit and for economic reasons, which affects millions of people worldwide.**

The discomfort caused by anxiety has always driven us to seek help from various therapists in the hope of finding an explanation and avoiding the unpleasant symptoms. Over time, this quest for help has led to the perception of anxiety as a disease. Not because anxiety is a disease, but because doctors looked for physical symptoms. Since there were none, anxiety was perceived as an invisible mental disorder.

**But how does the initial irrational fear arise, and why do we experience it repeatedly? The first irrational fear arises due to our misinterpretations of bodily signals, not because of illness. Illness can only create bodily signals such as dizziness or pressure in the chest, but not the subsequent anxiety symptoms, which occur due to the misinterpretation of these signals. When the anxiety returns, it is due to the fear of experiencing it again – fear of the fear itself. The original bodily signals are no longer relevant. From now on, it is solely the fear of the fear that perpetuates it.**

For anxiety to become a problem, the initial experience of anxiety must be misinterpreted. If it is not misinterpreted, no memory associations with the discomfort are created, and therefore, one will not remember having experienced anxiety. It is always in the memory that thoughts of anxiety are formed, and this cannot happen without a recollection of previous experiences of anxiety.

**The disease theory only describes what anxiety is. However, the important questions are: Why do we experience anxiety? Why do the initial bodily signals occur? Why do**

**we misinterpret them? Why do the first symptoms of anxiety arise? Why do we misinterpret them? Why does fear of the anxiety arise after an anxiety experience? When we understand why we experience irrational anxiety, we can change it. Knowing what anxiety is changes nothing. But by asking why irrational anxiety occurs, we can investigate it further.**

Imagine experiencing dizziness, heart palpitations, or chest pressure, but it doesn't feel uncomfortable. Your body is reacting, but you are not afraid or able to ignore it. Would you still experience unpleasant anxiety? Our response to what we feel in our body determines whether it becomes a problem. Without a reaction, the anxiety would disappear. However, it requires knowledge to avoid misinterpreting our symptoms—a knowledge we rarely receive. Instead, we are given a diagnosis and labeled: anxiety ridden.

This is the essence of the Misinterpretation Theory: Anxiety exists only because we were scared the first time, we misinterpreted some bodily signals.

**Dizziness or a stabbing pain in the chest can often trigger anxiety symptoms, which we misunderstand and thus end up in an uncomfortable anxiety attack. This experience is stored as a negative memory, which becomes the source of future anxious thoughts, leading to more anxiety symptoms and discomfort. The central question is: If anxiety symptoms were not unpleasant, would we still fear them? The answer is no. It is not the anxiety itself that holds us back, but our memory that retains the fear of the discomfort that the anxiety causes.**

From a biological perspective, the body releases adrenaline, cortisol, and noradrenaline when we feel anxiety. These substances increase heart rate, alertness, and tension, but why do they feel so uncomfortable? It's because they affect many organs simultaneously, and we do not respond physically, meaning we do not burn them off as the body is designed to. Instead, we sit still and feel them, leading to misinterpretations. We become trapped in our own misunderstandings due to the discomfort of inaction.

When anxiety symptoms arise, you might think: "I'm going insane..." or "I'm going to faint!" But in reality, what happens is this: You experience a normal bodily signal (e.g., dizziness), misinterpret it, develop anxiety symptoms, and misinterpret those as well. The discomfort is intensified both physically and mentally. If we could eliminate the physical discomfort, we would no longer interpret the symptoms as dangerous. Your brain would not perceive the situation as threatening, and the anxiety would lose its grip because it has nothing to "cling to." Without discomfort, there is no anxiety.

So how can we avoid the discomfort and thus the anxiety? When you experience even the slightest discomfort, say aloud: "Okay – I'm feeling my body's chemistry. It's just adrenaline causing the discomfort. It will pass in a moment, as it always does." Adrenaline is burned off by physical activity, so it might be a good idea to jump in place at the slightest symptoms of

anxiety. It's important to understand that all discomfort stems from your body's chemistry and not from a disease. Use language as a tool: "I am experiencing anxiety chemistry right now" instead of "I have anxiety."

**Conclusion: Discomfort is the key term. Anxiety cannot exist without discomfort, as it is the discomfort that prompts us to react and act in order to survive the danger that triggered the anxiety. You will discover that you have never been ill – you have simply not understood the body's signals correctly and why misinterpreting bodily and anxiety symptoms causes discomfort.**

### **Why does anxiety treatment only work for a few, when experts claim otherwise?**

If you have sought help for anxiety and feel that it "didn't really help," you are not alone. Statistics show that only about 20% experience a real effect from the treatments available today. However, there is a paradox: Experts and treatment centers often claim that 50-80% improve, especially with cognitive behavioral therapy. How can this be reconciled?

### **Here are some reasons why numbers and reality do not match:**

1. Participants in experiments are not like you and me. When researchers test a treatment, they select participants who fit perfectly into their study – often excluding those with severe depression, substance abuse, or trauma. Therefore, the results are based on a narrow group that does not reflect the real world of people with anxiety. Most of those seeking help have complex lives and multiple issues at once.

2. "Effect" is a fluid concept. When experts say that "80% experience an effect," it sounds fantastic – but what does it really mean? Often, it doesn't mean that one is completely free from anxiety, but perhaps just that there has been a slight improvement. Enough to be "statistically significant," but not necessarily enough for one to feel better.

If you still experience symptoms of anxiety, avoid certain situations, sleep poorly, and suffer from physical pain, but have nevertheless received a slightly lower score on a questionnaire, you are considered a "success".

3. Therapists are not neutral observers.

Let's be honest: Therapists and practitioners want to believe that their methods work. That's completely natural. However, this also means that there can be a certain bias when professionals themselves assess the effectiveness of their treatments. This bias exists in all

industries. At the same time, many research findings are influenced by publication bias: Studies showing positive results get published, while those showing no or negative effects are often tucked away.

#### 4. Treatment in reality often looks different.

Cognitive therapy in its purest form is a structured, in-depth, and long-term method, often self-funded and thus only accessible to a few resourceful individuals. Consequently, many do not have access to this version. Instead, they receive 2-5 consultations with a general practitioner or psychologist, general advice or unstructured supportive therapy, a referral, and several months of waiting time – which can lead to abandonment. The greatest barrier is the self-payment, which limits the widespread use of such methods. In other words, what is often referred to as "treatment" is frequently something quite different from what research studies.

#### 5. Those who drop out are not counted.

An overlooked fact is that many treatment studies exclude those who drop out. This often happens because the treatment does not work for them, or because they experience worsening conditions due to side effects. When only "those who completed the course" are counted, it creates a beautified picture. Only the strongest complete the tests.

So, what should we believe in? It's not that the research is lying. It simply measures something different from what people experience in practice. And in this difference, an illusion arises: that we have "good treatments" which "just haven't reached everyone yet."

Another explanation used to justify the lack of effectiveness of treatments is that anxiety is complex, and therefore not all methods work for everyone. But perhaps the real issue is that we still lack an honest conversation about why so many are left behind. The real problem is that we have not advanced in treatments since the 1960s, when economic interests began to dominate, halting any new research away from the disease model. Today, the same types of studies and tests are conducted as 60 years ago, with the same results.

We use the word "evidence" when we need to describe that something works for some people, but we forget that the same evidence also shows that it does not work for even more people.

We never see texts stating, "There is evidence that 80% do not experience improvement with...". Why do 80% not experience lasting effects from anxiety treatment – and what does that say about our approach? What does it tell us about the way we understand and treat anxiety?

### **Treatment helps – but against what?**

Most anxiety treatments focus on alleviating symptoms: medication attempts to reduce the intensity of anxiety, therapy aims to change thought patterns, mindfulness is intended to create calm and presence, and breathing exercises are designed to control panic. However, the fundamental question is seldom asked: "Why does the anxiety arise in the first place?" If you only suppress the symptoms without understanding the underlying mechanism, the anxiety is likely to return.

### **When the understanding of causes falters.**

Most treatment models are based on the concept of illness: that anxiety is a mental disorder arising from faults in the brain. Consequently, attempts are made to treat the brain with medication or the thoughts with therapy. Today, we know that irrational anxiety is created by repeated misunderstandings and not by illness. Yet, the illness theory is not abandoned. Why? This is why many treatments do not work in the long term: They focus on symptoms, not the cause. They underestimate the role of the body. They teach you to control, not to understand. They reinforce the identity of illness. They overlook the avoidance behavior and the perpetuation that is precisely created by the treatments.

### **How avoidance and safety strategies keep your anxiety alive.**

When experiencing anxiety, one instinctively does one thing: tries to avoid it. And that makes perfect sense. Why would anyone consciously move towards something they know will feel uncomfortable? But here's the problem: Avoidance and safety strategies reinforce to the brain that the danger is real. And so, the anxiety persists. No treatment can change this. Only a change in behavior towards the fear of more anxiety can alter or completely eliminate the fear of the anxiety.

### **Avoidance – the hidden maintainer.**

Imagine one day you have a panic attack in a store. You become frightened and think, "This must never happen again." So, you avoid the store. Your brain notes: "Store = danger. Good that you avoided it!" The next time you even think about going to a store, the symptoms return – and then you avoid it even more. Eventually, you end up isolating yourself at home.

Leaving home can feel like a major challenge, and the discomfort can quickly become overwhelming, as if everything is about to collapse. Many of us develop safety strategies that are invisible, but unfortunately not always helpful. You might think you are "brave" when you take the bus – but only if you have water with you, use your calming app, sit close to the door, and have spoken with your partner first. It may feel like you are mastering the situation, but in reality, you are still telling your brain: "This is dangerous – I need to be

prepared!" You might get through the situation, but you don't learn that you can handle it without a safety net. Remember: Anxiety doesn't disappear on its own. It only diminishes when you stop giving it what it needs to survive.

## When Medicine Doesn't Work – What Then?

Many start their anxiety treatment with medications such as SSRIs, benzodiazepines, or beta-blockers. This seems like a logical solution because the anxiety feels chemical and uncontrollable. But what if the medication doesn't work, or only works temporarily? What if you feel even more dependent and powerless afterwards?

It's not you who is at fault. When medication doesn't help, many people think: "I must be particularly ill." "My anxiety is chronic." "There is no help available." But often, you are not the problem. It's the understanding of the anxiety that is incorrect. It doesn't work because you are receiving the wrong treatment.

## Anxiety as Misinterpretation – Not a Brain Malfunction.

Instead of viewing anxiety as a chemical imbalance, the misinterpretation theory sees it as a learning process that has gone awry. You have learned to interpret physical signals as dangerous, to avoid discomfort, and to fear your own feelings. This creates a vicious cycle. No pill can teach you to think and act differently. But you can learn to do so yourself. So, what do you do when medication doesn't work? Stop believing that you are ill. Start understanding what you feel is the body's chemistry. What you fear is not the anxiety itself, but the feeling of anxiety. This can be unlearned, not medicated away. You won't be free from anxiety by talking, reading, or writing about it – but by acting. Understand that you are not dependent on medication. Your fear of discomfort creates your dependence on medication. This dependence is created by a lack of understanding of the role discomfort plays in your life.

**In short: We know that anxiety can be unlearned, just as it was learned through your misreactions to the initial symptoms. Not by suppressing the symptoms, but by understanding what is happening in the body when you feel discomfort.**

## Why talking a lot about anxiety can intensify it.

It often feels right and necessary to talk about one's anxiety. To put it into words. To share it with friends, family, therapists, on social media. And it can be helpful, especially in the beginning, as it provides a sense of understanding and relief. However, there is a downside that is rarely mentioned: The more you talk about your anxiety, the more you can keep yourself entrenched in it. Why? Because words shape experiences.

When you repeatedly tell yourself: "I have anxiety," "My anxiety does..." or "I have anxiety all the time..." you unconsciously create an identity around the anxiety. It becomes part of your memory, and you begin to see yourself as "an anxious person" – someone with a diagnosis, rather than a person who has experienced a brief, uncomfortable bout of anxiety that quickly passed. We tend to focus on the discomfort afterwards and often forget the other aspects, such as the situation we were in when it happened.

### The brain learns through repetition.

Every time you talk about anxiety, you activate the system in the brain that connects thoughts, emotions, and the body. You may know that the brain does not sharply distinguish between what you think and what you experience. Therefore, you can experience physical symptoms just by talking about anxiety—even if you are not in a situation that induces anxiety.

**In short: What you repeatedly articulate becomes a larger part of your reality. The more you talk, read, or write about anxiety, the more it will occupy your consciousness. This is completely normal but can be problematic when it comes to irrational anxiety. The best thing for your life would be to avoid discussing anxiety in a way that intensifies it. Remember: This doesn't mean you should remain silent. It means you should be mindful of how you talk about anxiety – and what it does to you.**

**Ask yourself: Why do I need to talk about the anxiety? Does it do any good for my life? Does it make me more positive in my daily life? Or does it cause me to think even more about the anxiety?**

### Is anxiety a disease? Or a misunderstanding?

When one experiences anxiety, it feels dangerous due to the discomfort. It is therefore completely natural that many quickly start to think, "There is something wrong with me." But what if this assumption—the very idea that anxiety is a disease—actually exacerbates the problem? Anxiety feels physical—but is it a physical illness? Most people who experience harmless irrational anxiety feel it in their body: heart palpitations, sweating, nausea, chest pressure, dizziness. Afterwards, it feels like something one should see a doctor for. There must be some illness at play. And that is exactly what many do. However,

when the doctor finds nothing physically wrong because the chemistry that created all the physical symptoms has long since burned out of the body, one instead receives a psychiatric diagnosis: anxiety disorder. And here arises the whole misunderstanding. Instead of seeing the symptoms as the body's natural reaction to stress or insecurity, which is exactly what it is, we begin to interpret them as evidence of illness. But the body is not sick. It is doing exactly what it should. It is just uncomfortable, and we interpret it as dangerous or as a sudden illness, because we have never been explained the role of discomfort in the experience of anxiety.

## Illness or Signal?

In traditional psychiatry, anxiety is viewed as a mental disorder, often rooted in genetic factors, chemical imbalances, or life circumstances. However, in the misinterpretation theory—the approach this text is based on—anxiety is seen differently: It is not the illness that creates the anxiety. It is our erroneous reaction to the body's signals that does so. Therefore, anxiety is not seen as a defect in the brain, but as a biological survival mechanism that we misunderstand due to discomfort and therefore misinterpret repeatedly, until we experience a panic attack. Afterwards, the anxiety naturally subsides, as the body has metabolized the chemicals, and the discomfort also ceases.

**What does that mean for you? You shouldn't try to control the anxiety – but understand it. And understanding creates freedom. When we understand a process rationally, it no longer generates fear. It's no different than being afraid of a large dog until you experience that it is the most loving dog in the world. You simply misinterpreted the dog's size as being dangerous to you. The same applies to anxiety; you are just misunderstanding the discomfort as symptoms of illness, when in reality, it is quite harmless.**

## The Six Main Reasons Why Anxiety Persists

If you are struggling with anxiety, you might have thought: "Why doesn't it go away, even though I know it's just anxiety?" This is because irrational anxiety isn't about the original experience, but about what happens afterward. Most people are not actually afraid of the cause of the anxiety – but of the discomfort of the anxiety itself.

Anxiety can feel like an uninvited guest who refuses to leave. According to the misinterpretation theory, there are six main reasons why anxiety persists. Once you understand these, you can begin to loosen its grip.

### 1. The Discomfort



Anxiety feels uncomfortable – you already know that. This discomfort is often the reason we do everything to avoid it. It's a natural reaction, but it's also what can cause the anxiety to return. The solution is to understand and accept that the discomfort stems from the body's chemistry and not from a disease. The discomfort cannot harm you, as it is a mental discomfort, not a physical one. A cut can harm you, but the discomfort from anxiety is just a feeling.

## 2. Memory

Your brain clearly remembers unpleasant experiences as a warning. When you face a situation that resembles past anxiety experiences, your memory can evoke the same feelings again. The solution is to "erase" the old anxiety memories so that new anxious thoughts cannot arise. Without memories of past anxiety, you cannot experience the same fear again. The memory stores discomfort if we react strongly to it, but by understanding that it is a misinterpretation, we can avoid storing it.

## 3. Body Chemistry

Stress hormones like adrenaline and cortisol prepare the body for fight or flight, which can feel overwhelming. If you don't physically use this energy, it can accumulate and intensify anxiety. The solution is to engage the body – jump in place at the slightest sign of anxiety. The body craves a physical response, so act instead of think.

## 4. Avoidance

The more you avoid, the more you confirm to your brain that there is something to fear. Each time you avoid a situation; you are telling your brain that it was the right thing to do. The solution is to do the opposite. Start small but move towards confronting the avoidance. Each time you face what you would otherwise avoid, the fear loses some of its power. It can be difficult but remember that the discomfort is due to your body's chemistry. Carry a note with a calming phrase with you, such as "This is just body chemistry, not illness." Keep it in your hand at all times when you are out. It will shift your focus from anxious thoughts to the note in your hand.

## 5. The Thoughts

The thoughts can become like a constant siren: "What if it happens again?" They keep the anxiety alive long after the danger has passed. The solution is to "erase" the memory of past anxiety. Thoughts of anxiety are merely images from the past, not reality.

## 6. Language

What you say about anxiety—aloud or to yourself—shapes your experience of it. If you say,

"my anxiety," you make it a part of you. The solution is to change the language. Instead, say "I am experiencing anxiety right now." This makes the experience temporary and separate from your core. Try to avoid using the word anxiety altogether. Remove it from your vocabulary. Use the word challenge instead, as in "I am facing challenges" rather than "I am experiencing anxiety."

There is no reason to create more anxiety by saying I have anxiety or my anxiety.

## **Discomfort – the core of all anxiety!**

Most people don't realize it, but we have a natural tendency to avoid discomfort encoded within us. It's a protective mechanism, just like anxiety is. We often talk about the causes of anxiety: trauma, thoughts, heredity, stress... But fundamentally, it's the discomfort that perpetuates the anxiety, not the cause of the anxiety itself. Not the thoughts. Not your genes. Not an imbalance in brain chemistry. But the discomfort you felt the first time—and which you will do anything to avoid feeling again. And that makes sense. Anxiety is uncomfortable. But it's precisely the fear of experiencing that discomfort that triggers the body to set off the alarm again and again.

Imagine your first experience of anxiety: Sudden dizziness, heart palpitations, etc. You don't understand what's happening. You become scared. And that—the physical reaction plus your fear of it—sets everything in motion. Later, you try everything to avoid the discomfort. You are seeking a doctor. Maybe you take medication. You avoid situations. You analyze the symptoms. You protect yourself. You constantly think about the anxiety in an attempt to avoid it. But the more you try to avoid discomfort, the more your brain becomes convinced of the danger.

It's easy to get trapped in a cycle of anxiety, where it feels like the discomfort will never end. However, there are concrete steps you can take to break this cycle. Start by saying aloud: "The discomfort I feel is body chemistry, not illness. It always passes." It sounds simple, and it is. Most importantly, it works.

Stop analyzing. You don't need to find the cause of the anxiety or solve its mystery. Let it pass with the knowledge that it is not dangerous. Put things into perspective: The discomfort from anxiety typically lasts only 3-5 minutes until the adrenaline burns out. It may feel like an eternity, but it is always temporary. Cortisol may take up to 30 minutes to dissipate, but it is the adrenaline that is the primary source of discomfort.

The more times you experience the discomfort and remind yourself that it is only the body's chemistry, the less the fear becomes. The brain learns: "This is not dangerous. It's just the body's chemistry, not a real threat." Remember: Anxiety itself is not dangerous. The discomfort is not a disease. It feels intense, but it is merely biology. When you stop fearing the discomfort, anxiety loses its power over you and eventually dissipates.

**Anxiety and thoughts are intricately connected. Thoughts keep the alarm going, even when the body is ready to rest. Many believe that anxiety starts with the thought: "What if..." But in reality, it begins with the body: a signal, a sensation, a discomfort. The thoughts follow and amplify everything.**

**Imagine anxiety as a grill. The body's chemistry is the spark, discomfort is the flame, and your thoughts. They are lighter fluids. When you think, "What if it happens again?" or "How can I avoid it?" you're pouring fuel on the fire. Not intentionally, but because you're trying to understand and control something that can't be controlled. It's hard to be rational about something that is coded to be irrational.**

Your brain tries to protect you by analyzing and planning. This is useful when we need to avoid accidents, but with anxiety, it does more harm than good. When you try to think your way out of anxiety, you create more unrest, and the body interprets this as danger, which triggers more stress chemicals. Thoughts are not dangerous in themselves, but our reaction to them can keep the anxiety going.

**So how do you learn to let your thoughts be?**

By understanding that they are created by our memory, which holds memories of past discomforts, it becomes clear. It is natural to remember these experiences, but it is crucial to show the brain that they are no longer relevant. You cannot think your way out of anxiety, but you can change your reaction to it.

**Anxiety often relates to something that happened in the past, which your brain is still trying to protect you from. The past might include a panic experience in the supermarket, the fear of fainting at work, or an anxiety attack on the train. These experiences are stored in the memory as alarm signals.**

Your brain is designed to protect you, so it remembers everything that felt dangerous and reacts if something seems dangerous again. The problem is that the memory remembers everything but doesn't understand if it is still relevant. It thinks you are in danger, just like before. That is what perpetuates the anxiety.

## **Can you change your memory?**

Yes, but not by erasing it. You can "forget" it by creating new experiences. Anxiety doesn't just reside in the body, but also in the memory, and it can be changed when you confront it with new knowledge, new actions, and new understanding. You don't need to forget anything to break free. You just need to show your brain that it's over. That you are not anxious after all.

Many people who experience anxiety may not realize it, but they often carry strong beliefs that make it difficult to let go of the anxiety once it takes hold. Thoughts like "Anxiety is

dangerous, I must avoid it" or "I am sick because I have a diagnosis and am taking medication" are not just random. They are deeply rooted assumptions that govern both behavior and emotions. The more we believe in them, the more they shape our reality. However, remember, beliefs are not facts, even though they may feel like it. They are based on how we experience and manage anxiety.

It's natural to believe that you have anxiety when you receive a diagnosis, take medication, or undergo therapy. The problem arises when this belief becomes difficult to let go of. In this way, our approach to anxiety can keep us trapped in it, instead of helping us out. Our beliefs feel like certain knowledge, but they are often based on misinterpretations and the fear of further discomfort. It is not a truth, but a belief that has been repeated so many times that it feels real.

You don't need to fight your thoughts, but you can start to question your beliefs. Am I really sick because I have misunderstood my own symptoms? Am I sick simply because I want to avoid further discomfort? Am I sick because I fear my body's reactions? Do I really need medication to counteract my body's chemistry? By starting to ask these questions, you can change everything. When what you thought was dangerous turns out not to be, the anxiety loses its grip. Your freedom begins when you dare to challenge what you thought you knew about yourself and your anxiety.

Understanding anxiety is crucial in determining how we treat it and live with it. Today, the disease model dominates within psychiatry and healthcare, but there is also an alternative:

**The Misinterpretation Theory, developed by generation-anxiety.com in 2018, fundamentally differs from other theories. Your perspective on anxiety may change depending on which explanation you choose.**

**The disease model views anxiety as a mental disorder caused by chemical imbalances, heredity, life stresses, or psychological traumas. Treatment often includes medication, psychotherapy, and coping strategies, with the message that you are ill, and it might be something you have to learn to live with. For some, this is a relief, but for others, where the treatment does not work, it can create a sense of hopelessness.**

**The misinterpretation theory, on the other hand, views anxiety as a misunderstanding. The initial anxiety arises when bodily signals are misinterpreted, which triggers anxiety symptoms that are also misinterpreted due to the significant discomfort they cause. It's not your brain that is ill, but rather your interpretation that has been incorrectly learned. The treatment focuses on understanding the body's chemistry, ceasing to react to symptoms as threats, and challenging avoidance to create new experiences. The message is: You are not sick – you have learned something incorrectly, and you can unlearn it.**

It's not black and white. The two models can complement each other. However, if you haven't experienced any benefit from the traditional disease understanding, discovering an

alternative explanation can be a relief. You are not sick. You are not broken. Your brain is simply doing what it believes it needs to do. And that can be changed. To determine which theory is correct, one could conduct a test that no professionals have yet been willing to perform, which is surprising if their true intention was to help.

## **We can do as we please.**

Helping people with anxiety involves understanding that you can achieve what you desire, even if you experience anxiety. It may sound tough, but it's important to realize that anxiety does not prevent you from living freely or pursuing your dreams. This is part of the illusion of anxiety. Many people convince themselves that they have lost the ability to do certain things, but these limitations stem from one thing: the fear of discomfort. You can still do everything you could before the anxiety, but the fear of discomfort holds you back.

After nearly 40 years of irrational fear, I can assure you that you won't become ill from doing what you think you can't. The worst you'll experience is temporary discomfort, which is merely a reaction from your body, created by your thoughts. These thoughts deceive you into believing that you are in danger or sick. But it is an illusion. When you stop seeing yourself as sick and fearing the discomfort, the anxiety will gradually lose its grip. I have experienced this myself, as have many others.

We can demonstrate this through our misinterpretation theory. Anxiety as a disease is a narrative from a time when we did not understand irrational anxiety as we do today. This narrative has never been scientifically proven, yet it persists because it provides an easy and convenient explanation. Unfortunately, this means that many who "suffer" from anxiety do not receive the optimal help. It is easier to perceive oneself as ill rather than to acknowledge that it concerns our own misinterpretations of the body's signals.

**The disease theory arose from a lack of understanding of the processes of anxiety. The way out of anxiety involves understanding your thoughts, feelings, and symptoms. Why do anxious thoughts arise? Why do you want to suppress these feelings? What is it about the symptoms of anxiety that makes us seek treatment beyond the discomfort they cause?**

## **The treatment depends on whether you have experienced irrational anxiety before.**

**According to the misinterpretation theory, the treatment depends on whether you have experienced irrational anxiety before. If not, the information in this book can**

**prevent it from becoming a problem. Understanding anxiety rarely allows it to become an issue. If you have experienced it, the solution is to "erase" the memories of past anxiety experiences. We remember the anxiety because we believe we are ill, and therefore, we think about it a lot. However, memory creates anxious thoughts because it contains the experience of the discomfort of anxiety, which we want to avoid again.**

To change this belief, we need to replace it with a new one: I am not ill. This new belief must become dominant. Do this by reminding yourself daily with small notes and posters in your home and avoid using the word "anxiety." Refer to it as challenges instead. Tell yourself, "I am not ill," as often as you can. Soon, you will experience something you thought was impossible.

## **Why does this method work?**

In a therapy room, posters and notes were strategically placed with the text "I am not sick," and the patients' reactions were observed over two years. The goal was to convince them that they are not sick just because they experience anxiety. The first session with a new client is always exciting as they look around the room and are introduced to this new way of thinking.

We review the main points of the method: the initial misinterpretations, the subsequent anxiety, the role of memory, the significance of discomfort, body chemistry, etc., as described in the manual. At the end, they receive a copy of our anxiety manual, "Understanding Anxiety to Let It Go." It is important to have at least two sessions a week. In the second session, we ask the participant to write "I am not sick" on a note, after which we go out into the street together. There, we ask the participant to describe an anxiety challenge, such as taking the bus, shopping, or driving. We then expose one of these challenges together. It is rarely a big problem, as the therapist acts as a source of comfort. After 6-8 sessions, most can confront their previous challenges on their own without problems, with the note in hand. Already after the second session, they are encouraged to place notes around their home and hang up posters, as described in the manual. Results appear quickly. After 8 weeks, most are completely free from anxiety. However, they are asked to keep the posters up at home for a year to avoid relapse with the new learning. Naturally, there is a variation in how people react when they step into the therapy room, but no one has turned back yet. Most clients are familiar with the method from social media. By focusing on the fact that one is not sick, anyone can be free from anxiety again. The method works for all types of anxiety, as they share the common issue that discomfort is the main problem. Symptoms are merely side effects of the discomfort and therefore not as important to focus on. The change occurs when one understands the role of discomfort in anxiety. Anxiety exists only because we give it attention. When that attention is removed, the anxiety is "forgotten." It is a completely natural process.

The problem with the disease model is that it never allows the patient to "forget" their anxiety, as all treatment assumes of illness. Medication convinces you that you are sick – why else would you take it? Cognitive therapies focus heavily on anxiety as a disease, which reinforces the belief in anxiety among patients. These factors are unfortunate if one wishes to be free from anxiety. Being constantly told that you are sick helps no one.

Now the challenge is what to believe: the disease model or our misinterpretation theory.

What will have the best effect? CBT (Cognitive Behavioral Therapy) and MCT (Metacognitive Therapy) tell you that you are ill and may need to accept living with anxiety. Filling out forms to assess your anxiety level, restructuring and reducing your thoughts, and rating your anxiety on a scale from 1 to 10. Or... Understand that anxiety arises when you misinterpret the body's chemistry, that it is the discomfort that creates the fear of experiencing anxiety again, that memory stores anxiety experiences and thus generates thoughts. Understand that you are not sick but merely misinterpreting what you feel because you are more sensitive in challenging life situations.

You can test this new understanding and see what happens. Your journey towards freedom begins with one sentence: "I am not sick." Repeat it. Write it. See it. Say it. And if one day you forget it – it's already hanging on your wall through your posters with the same text.

## **Conclusion: From Fear to Freedom - It Starts with Understanding**

Anxiety can feel like an enemy lurking in the darkness – unpredictable, all-consuming, and merciless. But as you have now learned, reality can look completely different if we choose it too.

Anxiety is not an external threat or disease. It resides within you, in your own interpretation of it. It is not something external. Anxiety is what you make of it—dangerous or just an uncomfortable feeling when experienced—and that is precisely why it can also be changed. When you understand the difference between rational and irrational anxiety, you realize that it is not the anxiety itself that is dangerous, it is the story you tell yourself about it. When you can accept that your brain has learned to fear anxiety through misinterpretation and repetition, you also begin to see that you can learn something new. You can even rewrite the story. You can break the cycle by understanding the anxiety, allowing it to release. And most importantly: You do not need to wait for the anxiety to disappear before you can live again. You can start to change with the anxiety by your side—and thereby show your brain that it completely misunderstood the anxiety. The way out of anxiety is not about controlling your thoughts, suppressing your feelings, or avoiding your symptoms. It is about understanding them. In reality, the fear of anxiety was an illusion. It was never dangerous to experience, but merely uncomfortable and misunderstood because of this discomfort, which we therefore misinterpreted.

**Let's conclude by taking a summarizing look at the two theories:**

**The disease model explains anxiety based on biological factors such as genetics and chemical imbalances in the brain. This explanation might make sense for the very first anxiety attack, but it becomes insufficient thereafter. Subsequent experiences of anxiety primarily arise due to the psychological memory traces formed with each irrational anxiety experience. These traces create the fear that the anxiety will return – and it is precisely this fear that perpetuates the anxiety. If the first anxiety experience did not leave these psychological traces, just as rational anxiety does not, the anxiety would not recur. Therefore, it is misleading when the disease model claims that all anxiety is due to genetic or chemical imbalance. This does not mean that biology plays no role, but rather that psychiatry has long overlooked or underestimated the importance of psychology and memory.**

**The Misinterpretation Theory offers a new and uplifting way to understand anxiety. While the disease model has long attempted to explain anxiety as something biologically determined and beyond our control, the Misinterpretation Theory demonstrates that anxiety need not be a chronic condition but rather stems from a series of misunderstandings and subsequent misinterpretations of the body's natural reactions. This theory shows that anxiety arises because we misinterpret ordinary bodily signals as signs of danger or illness. When these signals are misinterpreted, anxiety symptoms occur, leading to repeated experiences of anxiety. It is not biology that perpetuates anxiety, but our psychological reactions to the body's normal functions.**

The positive message is that once we learn to correctly interpret the body's signals as natural reactions rather than illnesses, we can break the cycle of misinterpretations. Thus, we can escape anxiety through increased knowledge and insight, without relying on medical treatment and lengthy therapy sessions. The misinterpretation theory offers hope because it places control back in the hands of the individual and away from the healthcare system, where there is a risk of being pathologized. Anxiety no longer needs to be seen as a disease we are trapped in – instead, it is misinterpretations that we can easily correct with the right knowledge and a societal will to do so.

### **What if we had always understood anxiety correctly...**

If people in the past had known that anxiety is caused by a misinterpretation of the body's own signals – and that it's about chemistry, not danger – then the disease model of anxiety would probably never have been created.



Why would one seek treatment if they knew nothing was wrong?

**The truth is: there is nothing dangerous about anxiety. It is merely uncomfortable because we do not respond to it physically as we are wired to.**

It feels intense – but it's just biology that we didn't understand in the past.

We went to the doctor because the discomfort frightened us. Not because we were ill, but because we didn't understand what was happening. We were looking for an explanation, but over time, we ended up being confronted with illness.

"How can something feel so uncomfortable—without being an illness?" we wondered. "It must be investigated... I do not want to experience it again."

**But imagine a different reaction: one based on insight and knowledge.**

**Another way to understand anxiety.**

You suddenly experience symptoms of anxiety. It has happened before. Your heart races, you feel dizzy, your thoughts are spinning, etc.

Afterward, you think:

"Wow... that was intense. Fortunately, it was just my body's chemistry... again – the old protective reaction. It passed, as it usually does. Thankfully, I have an explanation for the discomfort I feel; otherwise, I would still think there was something seriously wrong like before. But it's just chemistry. I know now that I wasn't sick."

And with that understanding, the body settles down. Not because the symptoms disappear immediately, but because no one interprets the discomfort as dangerous, merely uncomfortable.

**To therapists: A new understanding of anxiety you should consider.**

Misinterpretation theory suggests that anxiety arises when the body's signals are misinterpreted as danger: Rapid heartbeat → heart attack, Dizziness → fainting, Tunnel vision → insanity, Restlessness → loss of control. The client is not reacting to actual danger, but to their own reaction. It's the fear of fear itself. When the therapist only treats the symptoms without helping the client understand the cause of their reaction, the treatment

remains superficial. We need to shift the focus from what anxiety is, to why we experience it. As a therapist, you can move from reducing symptoms to explaining and demystifying them. When the client understands that the body is not attacking but trying to protect, the entire perspective changes. Misinterpretation theory does not require us to discard everything, but it does encourage us to question what we thought we knew about anxiety.

Anxiety is more prevalent than ever, and as a therapist, you often encounter clients who have tried everything from cognitive therapy to medication – yet still feel stuck. Perhaps you feel the same, not because you don't want to help, but because your understanding of anxiety is limited by the traditional model taught in health education programs. The disease model dominates, and anxiety is often seen as a mental disorder. Diagnoses are made based on symptoms, and treatment focuses on "regulating," "accepting," or "controlling" the anxiety. The goal? To teach the client to live with their anxiety. But what if the client isn't sick? What if the anxiety isn't about dysfunction, but about a simple biological reaction that is misunderstood?

## **So, what do you do now?**

Accepting that anxiety is created by chemistry.

Accept that the discomfort is created by chemistry.

Accepting that discomfort is experienced because we do not physically act on what we are programmed to do.

Acknowledge that it is your belief about being ill that needs to change.

Accept that your anxiety memory needs to be "overwritten" with a new memory.

Understand that the use of the word "anxiety" amplifies your anxiety.

Follow the advice in the text.

If you are now captivated by this light version of the book "Understanding Anxiety" and wish to delve deeper into the misinterpretation theory, the full book can be downloaded at [generation-anxiety.com](http://generation-anxiety.com). Simply scan the QR code. The book is free.

## **Appendix 1. Recovery rates for various anxiety treatments**

This appendix includes a table that displays the healing rates for various anxiety treatments, as well as the percentage of anxiety sufferers who receive these treatments. The table below

presents data from the Anxiety and Depression Association of America (ADAA). It is applicable to the USA.

Type of Treatment	Healing Rate	Percentage of anxiety sufferers who receive treatment
Cognitive Behavioral Therapy (CBT)	50-75%	10-20%
Medication	40-60%	30-40%
Exposure Therapy	60-90%	5-10%
Mindfulness and Meditation	30-50%	10-15%
Physical Activity and Exercise	20-40%	20-30%
Group Therapy	40-60%	5-10%

Source: Anxiety and Depression Association of America (ADAA):

Explanation and Context: The various treatments have varying degrees of effectiveness based on individual differences and preferences. Cognitive Behavioral Therapy (CBT) has a high success rate and is used by a large portion of those seeking treatment. Medication, especially SSRIs and SNRIs, is also widely used and effective for some.

When assessing the effectiveness of treatments such as Cognitive Behavioral Therapy (CBT), Metacognitive Therapy (MCT), and medical treatment (SSRIs) for anxiety, the Number Needed to Treat (NNT) is an important tool. It helps us understand how many individuals need to be treated to one person to achieve noticeable improvement.

#### **What is the NNT for anxiety treatments?**

**CBT: NNT is approximately 5. This means that for every 5 people who receive CBT, one will achieve significant improvement compared to the control group.**

**MCT: Like CBT, MCT has an NNT of about 5, making it equally (in)effective as a treatment.**

**SSRI: Medications like SSRIs have an NNT (Number Needed to Treat) of about 7, which means that for every 7 people treated, one will experience significant improvement.**

#### **What does it mean in practice?**

For every 1000 people treated:

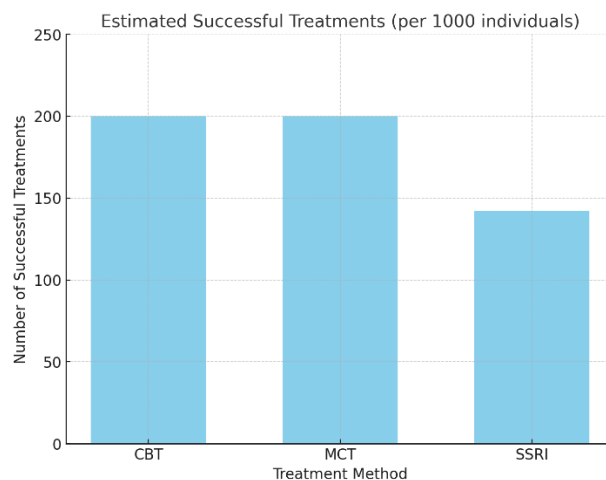
CBT and MCT will help approximately 200 people achieve noticeable improvements.

SSRIs will help about 142 people.

While therapies appear to be slightly more effective than medication, the choice may depend on individual needs, preferences, and side effects. For instance, medication might be a quicker solution for some, while therapy offers long-term strategies.

### Why is NNT Important?

NNT provides a transparent and quantitative picture of how effective treatment options are. It aids patients and therapists in making informed choices and evaluates not only "what works," but also "how well it works."



As you can see, the numbers are not impressive. What do you think is the reason?

At Generation-Anxiety, we find it difficult to see how a 20% or less effectiveness can be considered an effective treatment. Where should the 80% who do not experience any effect go afterwards? What options do they have?

Here are some relevant sources for further reading on NNT and the effectiveness of anxiety treatments:

### National Institute for Health and Care Excellence (NICE)

Guidelines on the treatment of anxiety disorders, including NNT (Number Needed to Treat) for various therapies and medications. [Link to NICE guidelines.](#)

### Cochrane Reviews

Meta-analyses and systematic reviews of treatments such as CBT, MCT, and SSRIs. [Link to the Cochrane Library](#)

### **American Psychological Association (APA)**

Evidence-based guidelines for psychotherapy in anxiety disorders. [Link to APA Guidelines](#)

### **Health Authority (Denmark)**

National Clinical Guidelines for the Treatment of Anxiety Disorders in Adults. National Clinical Guidelines

### **PubMed**

Search engines for scientific articles where you can find studies on NNT for specific treatments. [Link to PubMed](#).

### **Baldwin DS et al. (2011)**

Study on the effectiveness of medical treatment for generalized anxiety (NNT for SSRI). Article: "Efficacy of drug treatments for generalized anxiety disorder: systematic review and meta-analysis." [Link to the article on PubMed](#).

### **Wells A et al. (2015)**

Study on the Effectiveness of MCT for Anxiety Disorders. Article: "Metacognitive Therapy for Anxiety and Depression: A Review of Current Empirical Findings." [Link to the article on ResearchGate](#).

These sources provide a solid foundation for further exploring NNT and the effectiveness of treatment methods.

As you can see, there is much left to be desired from the recognized treatments if they are to make a real difference. It is surprising how one can call such high NNT numbers evidence. If the evidence shows an effect of 20%, then it must also show a lack of effect in 80%, which is the figure we should focus on reducing.

Cognitive therapy thus helps about 20% of those suffering from anxiety, but why doesn't it help more? Our clear answer is that it overlooks misinterpretation as the cause of anxiety, which is precisely the strength of Misinterpretation Theory.

We would really like to see more focus and effort put into helping all those who do not benefit from recognized treatments, as well as those who are left on year-long medical symptom management.

These NNT figures also show that the scientific validity is incredibly low for what can be described as evidence.

The most important thing is probably to consider why the evidence is so weak for anxiety treatment.

## **Appendix 2. Misinterpretation Theory: A Revolutionary New Understanding of Anxiety**

### **Historical Background of Understanding Anxiety**

Since the dawn of time, it has been assumed that irrational fear was a disease due to the discomfort it caused, as it could not be explained rationally in the past. The logical conclusion was: How can something so unpleasant not be a disease?

In the 1960s, Aaron T. Beck's cognitive treatment model began to gain prominence—a model that was originally developed for depression but which, in the following decades, also came to be accepted as a treatment for anxiety. The first formal anxiety diagnoses were developed in the 1980s and were made strictly based on symptom profiles.

Traditional treatment has since focused on "regulating," "accepting," or "controlling" anxiety. Patients were told that they had to accept living with anxiety, as it was considered a genetic flaw or an imbalance in brain chemistry. Medical treatment with SSRI medications was presented as a solution, but statistics show that only about 20% experience a real effect from the medication. So, what do we do about the remaining 80% who are left without any effect?

### **A personal starting point for a new theory**

After nearly 40 years of experiencing anxiety symptoms with no prospect of freedom, I began in 2016 to investigate why I had not become free from anxiety after so many years. I had gone through all the conventional treatment methods several times, experienced thousands of anxiety symptoms, and several hundred panic attacks - all without lasting results. Why didn't the established methods work?

### **The Origin of Misinterpretation Theory**

After 6 years of intensive research, studies, and testing, Generation-Anxiety.com has developed a new and groundbreaking theory of anxiety, which we call the misinterpretation model. This model fundamentally challenges the established view of anxiety as a disease.

### **What is the Misinterpretation Theory?**

The Misinterpretation Theory proves that anxiety arises when initial bodily signals are misinterpreted as danger. This misinterpretation triggers anxiety symptoms, which are also misinterpreted, leading to the experience of one's first panic attack.

The subsequent anxiety is not triggered by the original cause, but by the fear of more anxiety. This occurs because the initial experience of anxiety has left a strong memory trace

due to the discomfort that was interpreted as a danger. Thus, the reason for the initial anxiety is now replaced by the fear of more anxiety. Therefore, genetics or imbalances in the brain are no longer relevant causes after the first experience of anxiety.

The Misinterpretation Theory further asserts that the individual is not reacting to an actual danger or illness, but rather to their own irrational response to adrenaline and the discomfort caused by other chemical substances in the body.

### **The Problem with the Disease Model**

Patients' descriptions of symptoms have historically been problematic because the symptoms often were not physically present during the doctor's visit—the chemistry that created the symptoms had long since burned out of the body. Therefore, anxiety was classified as something "internally psychological."

Unfortunately, the disease model has had the consequence that people begin to feel and see themselves as ill once they are pathologized with a diagnosis. It is difficult to convince someone suffering from anxiety that they are not ill if they have already convinced themselves that they are. This is again due to the discomfort caused by the symptoms of anxiety. We think: "This discomfort must be due to an illness - I can feel that something is wrong throughout my body." In reality, it is body chemistry, not illness, which creates the discomfort.

You actually make people sick by telling them they are sick. It's a paradox that the healthcare system has developed a disease theory that it cannot cure itself.

### **The Universality of the Misinterpretation Model**

The misinterpretation model assumes that all anxiety is fundamentally the same due to our uniform body chemistry. All symptoms of anxiety, regardless of the diagnosis, arise from this same body chemistry. At the same time, the fear of discomfort is universal and the main reason for continued anxiety across all diagnoses.

Therefore, fear of fear itself cannot meaningfully be divided into different diagnoses. The symptoms are never the core issue, even though we believe they are - our fear of experiencing discomfort is the real problem. It is the fear of discomfort that triggers the symptoms - not the other way around.

### **Scientific Evidence - A Critical Perspective**

The scientific evidence that anxiety is a "disease" primarily comes from:

**Neurobiology:** Anxiety is associated with overactivity in the amygdala and altered regulation of neurotransmitters (serotonin, GABA, etc.).

**Genetics:** Anxiety disorders have a hereditary component. If a parent has anxiety, the likelihood that the child will develop it is higher.

Regardless of the reasons listed for anxiety as a disease, the anxiety can only continue and develop into a disorder if we misinterpret the initial bodily signals. The reasons themselves are not a problem unless they are misinterpreted.

Even with overactivity in the amygdala, a trigger is required to initiate the anxiety chemistry, and this can only occur through misinterpretation of bodily signals or symptoms. Anxiety always requires an internal (thoughts) or external (e.g., a large barking dog) trigger to initiate the anxiety chemistry. No matter how overactive your amygdala is, it must first be activated to trigger the chemistry.

The same applies to genetics. You might be genetically predisposed to anxiety, but if there's nothing in life to trigger it, it won't occur.

### **The Truth About Anxiety**

The truth is: If we did not perceive anxiety as a problem, we would not view it as a disease. However, the discomfort has led us to see it as a problem when we experience this discomfort irrationally - that is, without an obvious cause.

Anxiety can still be debilitating, regardless of how we interpret it. But it only becomes debilitating because we address it incorrectly. If the anxiety is not stopped, it becomes debilitating. And none of the recognized treatments can effectively stop the anxiety. Therefore, it becomes debilitating for many.

### **The Misinterpretation Model's Simple Solution**

The advantage of the misinterpretation model is that one does not need to explain complex psychological theories, but simply ask the client to introduce three simple things into their life and see what happens:

Repeat to yourself: "I am not sick"!

Place posters with the same text strategically around your home (ideally in the living room, kitchen, bathroom, and bedroom).

Place small notes, such as Post-its, with the same text around your home in strategic locations (kitchen cabinets, nightstand, coffee table, refrigerator, bathroom mirror, etc.)

When leaving home, one should always carry a note in one hand with the text "I am not sick."

These three simple measures will shift the focus away from anxiety in a short period of time. Anyone can try the method regardless of their diagnosis, and if nothing happens, no harm is done, as the method has no side effects. One can always return to their previous life and possibly continue medication alone again - which cannot be said about the disease model, which can have significant side effects, even if the medication does not work.

**Understanding is the key.**



To understand anxiety, one must divide it into two categories: rational and irrational anxiety. It is always the irrational anxiety that we refer to when we talk about anxiety disorders, which the healthcare system also often overlooks. Rational anxiety never poses a problem, as it only responds to real danger.

Therefore, there is no such thing as "pathological anxiety." It is artificially created. There is rational and irrational anxiety. Irrational anxiety can be perceived as pathological because it is misunderstood.

Anxiety is not about receiving support for one's anxiety but about understanding what happens inside oneself when experiencing symptoms of anxiety – that is, understanding the body's chemistry in relation to the triggering of anxiety, so that one can completely let it go.

If one wants to delve deeper into the theory and understand why the misinterpretation model works, the complete manual can be downloaded for free from our website.

The Misinterpretation Method is quite easy to verify for accuracy. By implementing the three mentioned techniques, one can personally experience the effect. These are techniques that do not need to be discussed, but rather tested, as they are based on logic and rationale, not on science and evidence.