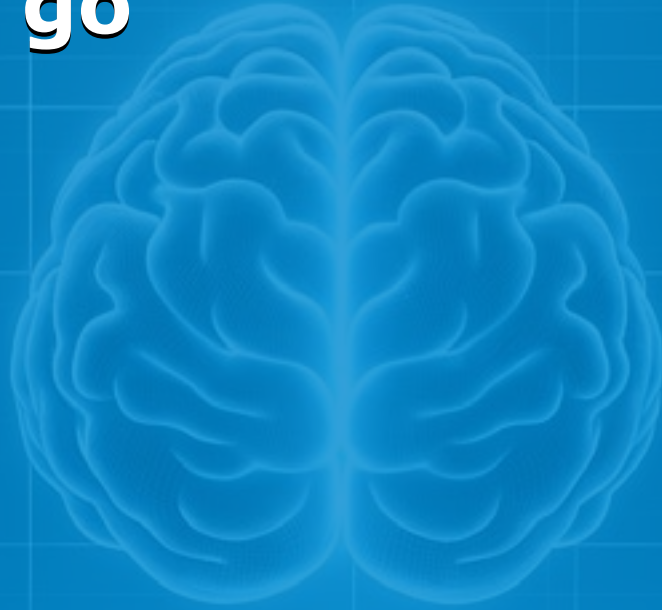


Thomas Fogh Vinter

UNDERSTAND ANXIETY

To let it go



The five main causes of anxiety
Introduction to proper anxiety management

Teaching, school and self-help book for everyone

Publisher: Generation-Anxiety.com

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Publisher: Generation-anxiety.com

Co-Publisher: The truth about fear

Disclaimer: This book serves as a general information and educational resource on anxiety. It is not intended as a substitute for professional medical advice, diagnosis or treatment. It is always recommended to follow your doctor's advice and seek referrals to relevant professionals, such as psychologists or psychiatrists.

Anxiety related to other somatic diseases or disorders is not covered in this book.

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Generation-anxiety.com is a non-profit NGO that works voluntarily to help people with anxiety globally.

The book is free for individuals and private associations and their members. Schools and institutions can purchase licenses based on the number of users.

About the book.

The purpose of this book is to provide objective information about anxiety, not to emphasize or denigrate certain treatment methods? All methods have their merits if they help just one anxiety sufferer.

The book does not cover in detail CBT, MCT, ACT or medical treatment, but mentions them briefly. The content is developed by Generation-Anxiety.com and is unique to this book.

The texts are fact-checked and based on extensive data, including millions of articles on anxiety, ensuring accuracy and evidence. Only a few texts analyze were done with artificial intelligence (AI), as AI cannot yet write objectively about anxiety.

The aim of the book is to show how memories of past anxiety experiences trigger future thoughts and symptoms, and how to avoid further anxiety.

Note: The book only focuses on **subsequent anxiety**, not the cause of your initial anxiety experience. This book only covers the anxiety diagnoses that lead to anxiety of the anxiety.

Anxiety about anxiety, also known as "anticipatory anxiety" or "meta-fear," occurs as part of several anxiety diagnoses. The following anxiety disorders are particularly associated with this mechanism:

1. **Panic anxiety (panic disorder)**
2. **Agoraphobia**
3. **Social phobia (social anxiety disorder)**
4. **Generalized Anxiety Disorder (GAD)**
5. **Specific phobias**

Since they have the same challenge, namely anxiety about the anxiety, the same treatment approach can be used. The cause (diagnosis) of the anxiety is very rarely the problem, but the anxiety discomfort that creates anxiety for more anxiety is because it also creates avoidance behavior and retention after the initial anxiety experiences.

The book is for those who have or are about to give up hope of becoming anxiety-free, and for those who have not experienced the desired effect of recognized treatments.

Repetition in the book emphasizes important points as repetition reinforces learning, especially in anxiety reduction. It is important to fully understand the text on first reading. I ask for your patience with the repetitions, even though they may seem tiring.

As I am not a professional writer or native English speaker, linguistic errors will occur.

Brief about the author and purpose of the book.

I experienced symptoms and anxiety attacks from 1976 to 2016. for 37 years. During this period, I was limited by agoraphobia and constant anxiety. Over the years, this led to the loss of many important aspects of my life as my world became smaller and more limited. This happened because I did not take active steps to manage the anxiety myself. I left it to the healthcare system, which didn't help. There could be several reasons for this.

Treatments described as effective by professionals are often perceived differently by anxiety sufferers when the treatments are not effective. Statistics show that many do not experience improvement through these treatments. [See appendix 1.](#)

Due to the lack of effect of the treatments, in 2016 I decided to investigate why I had not become anxiety-free after 37 years and what aspects the treatment might have missed.

Since becoming anxiety free in 2018, I have dedicated myself to assisting others who experience similar challenges. I make all my help, information, knowledge and literature freely available as I believe that achieving anxiety freedom should not cost money. Personally, I have invested significant amounts of money in anxiety literature and treatments without significant effect and experienced financial exploitation due to my disorder.

I consider it a strength that I don't have a health professional education - I am IT trained. This has forced me to use my analytical and rational IT skills to think solution-oriented about anxiety and not just symptom-oriented, which has not solved the problems.

I am not disputing the accepted theoretical knowledge of anxiety. I am merely suggesting that it may be beneficial to also consider alternative perspectives to fully understand anxiety. I wanted to explore what anxiety can be if we disregard the illness aspect. Furthermore, I wanted to uncover why none of the recognized treatment methods had helped me and many others for so many years and what could potentially work.

I have researched what might be overlooked, misconceived, misunderstood and misinterpreted about anxiety theory. It can't just be attributed to our differences, which is often cited when a treatment doesn't work. There must be other factors involved.

Through my research, I was able to answer these questions. This book addresses the answers found, among other things. Of course, I recognize all mental health diagnoses and the need for more treatment options and resources.

Welcome to a world of deception, avoidance, retention, discomfort and misunderstanding.

Welcome to the world of anxiety.

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Content

Introduction to the book	1
Foreword	3
Part 1: Introduction and Basic Understanding of Anxiety	4
Chapter 1: Pre-intro	4
Chapter 2: Intro	7
Chapter 3: Understanding anxiety	8
Chapter 4: Anxiety info and important anxiety knowledge	15
Chapter 5: Following Irrational Anxiety: The Five Causes	44
Part 2: Analysis of Treatment Methods Chapter 6: Anxiety Assessment	50
Chapter 6: Anxiety beliefs and Fear of more anxiety.....	51
Chapter 7: Fear of anxiety (Agoraphobia)	53
Chapter 8: Our thoughts and feelings	55
Chapter 9: Avoidance behavior: The road to prison.....	58
Staying in the grip of anxiety.....	58
Chapter 10: Anxiety - the forbidden word	59
Chapter 11: At the doctor.....	61
Chapter 12: Medicine and Medical Treatment.....	63
Chapter 13: SSRI Medication and Traditional.....	64
Chapter 14: Cognitive treatments	67
Cognitive Behavioral Therapy (CBT)	67
Chapter 15: Metacognitive therapy (MCT).....	68
Chapter 16: Exposure therapy	69
Strengths and weaknesses of existing methods.....	71
Part 3: Memory and the Anxiety Cycle.....	72
Chapter 17: Memory. The path to freedom.	72
The three types of memory	74
Chapter 18: The modern anxiety.....	76
Chapter 19: Is anxiety a disease	76

Chapter 20: My first anxiety attack	79
Chapter 21: Our desire to avoid discomfort	82
Part 4: The method.....	84
Chapter 22: Why was the method developed?	84
Chapter 23: What does the research say about the Method?	86
Chapter 24: Practical methods to overcome anxiety	87
Chapter 25: What is transformative learning?	93
Chapter 26: Who is the Method for?	94
Chapter 27: How to test the method?	95
Chapter 28: Ask for help. People want to.....	102
Part 5: Conclusion.....	103
Chapter 29: The Road to Anxiety Freedom - Documented Effect of the Method.....	103
Chapter 30: Conclusion	105
Diploma: I am anxiety free	106
Extra: Driving anxiety.....	107
Appendix	110
Appendix 1. Cure rates for the different anxiety treatments	110
What is the NNT for anxiety treatments?	110
Appendix 2. Method treatment plan.....	113
Example of a 30-day plan.	115
Glossary of terms	115
Sources:	117

Introduction to the book

Let's try to get you out of anxiety together.

To achieve this, you need to learn some new things and adjust your daily behavior. We guide you step by step in the book.

Science has shown that anxiety can, for the most part, be treated with knowledge and information if done early on. That is, before the anxiety sets in as a disease conviction. Therefore, information is crucial at an early stage before you get caught in the anxiety spiral. This book is an attempt to do just that. To stop anxiety through information.

Link to the claim.

- psykiatrien.rm.dk - Anxiety in adults
- dialnet.unirioja.es - Effectiveness of psychological interventions
- kognitiv.no - Anxiety (PDF)

Have you tried to find peace from anxiety through medication or therapy, but not experienced the desired effect? *Understanding Anxiety - Letting It Go* offers a different approach to managing anxiety - based on practical solutions that are easy to apply in everyday life and supported by neuroscientific insights.

Challenging traditional methods, the book focuses on how you can break the cycle of anxiety by working with your memory and beliefs about anxiety as they play a crucial role in the maintenance of anxiety.

The book is aimed at those who:

- Want a self-help method that doesn't require expensive therapy or medication.
- Seeking a scientific understanding of how anxiety arises and can be released.
- Have the courage to challenge your current beliefs about anxiety and illness.

It's not about avoiding anxiety or numbing the symptoms. It's about understanding and transforming the memory that creates the thoughts that keep you in the grip of anxiety.

What you can expect.

This book is based on a simple idea: You don't need scientific studies or complex theories to understand and manage anxiety. Instead, we can use something we already have - our ability to think rationally and ask questions. The methodology in this book is not based on laboratory experiments or research reports, but on practical experience and logical reflection on how anxiety works.

Many modern treatments, such as medication and therapy, have helped millions, but as we know, they don't work for everyone. See [Appendix 1](#). For too many, their focus on symptoms, diagnoses and chemical treatments can feel insufficient or even frustrating. This method takes a different approach. It's about understanding anxiety as a natural but repetitive temporary state that occurs again and again because of our memory memories that create the thoughts - not as a disease that necessarily requires treatment.

Anxiety can seem overwhelming because it feels uncomfortable and uncontrollable. But by using rational thinking, you can start to break the cycle of anxiety.

Consider this: *Why do I fear anxiety after experiencing it? Why didn't I fear it before? Where does this fear come from? Why does anxiety scare me now, just because I've experienced it?*

The method shown here is not a substitute for medication or therapy for those who need it. Nor is it "scientific" in the traditional sense. It is a practical and logical approach that has helped me, and many others overcome anxiety completely. I hope and wish it will help you too.

The goal is not to convince you with data or evidence, but to show you how you can use your own thoughts and experiences to find a way out of anxiety.

Effectiveness isn't always about scientific evidence. Sometimes it's just about what works.

Foreword

There are several methods to overcome anxiety. This book presents a method that is effective for most individuals. Our goal is to develop solutions that meet the challenges of modern man and create treatments that are affordable and widely available.

We work on the assumption that anxiety experiences are stored in memory and activate new symptoms through thought patterns stemming from these unpleasant memories. We focus on five reasons why anxiety can persist and how these causes can be eliminated.

We introduce a method of anxiety management that aims to eliminate anxiety by "erasing" the automatic reactions in the memory that keep the individual in fear of further anxiety reactions. Irrational anxiety often leads to a belief of illness due to the illness-like symptoms created by adrenaline and other substances. However, these symptoms are merely bodily sensations and not signs of real illness.

Yet we react strongly to these sensations because the brain perceives the many simultaneous changes in the body as potential danger signals. When the brain cannot identify a clear cause for the symptoms, it interprets the situation as a potential danger, causing thoughts to escalate to find a solution. This typically results in thoughts like: "Oh no, I'm going to have a heart attack now!" These thoughts trigger a panic reaction, which is experienced as an anxiety attack - a physiological chemical reaction.

The unpleasant experience makes us think we're sick, so we go to the doctor. Often, we are diagnosed with anxiety and given medication. We then try to avoid future discomfort by following medical treatment.

Without anxiety memory, thoughts would not arise, and we would return to a time without anxiety. It is therefore necessary to "overwrite" this memory.

This book aims to tackle anxiety memory so you will know how to deal with anxiety in the future. Our method differs from medication and cognitive therapies by focusing on the memory of past anxiety experiences, rather than treating anxiety as a disease.

Part 1: Introduction and Basic Understanding of Anxiety

Chapter 1: Pre-intro

This book is not a professional textbook. It presents a rational and logical approach to managing anxiety.

To get an idea of what this book is about, here is a brief introduction.

We'll cover the following topics as they all contribute to maintaining anxiety.

- Fear of anxiety
- Avoidance behavior
- Retention in anxiety
- Our memory of anxiety
- Our body chemistry
- Our fear of discomfort.
- Our language around anxiety.
- Our anxiety beliefs.

It's all these challenges that make it so hard to let go of anxiety.

To understand this, we need to go back to right after the first anxiety symptom(s) or attack, as this is where the problems begin.

The first anxiety was a problem because it was uncomfortable.

The subsequent anxiety is a problem because it creates the above challenges.

When experiencing irrational anxiety for the first time, memory associations to the anxiety experience are created due to the negative and unpleasant experience. Therefore, it is important to remove these associations to the anxiety as early as possible after the first anxiety experience. If this does not happen, these memory associations will create new anxiety symptoms.

It is questionable why more isn't being done to address the symptom-bearing memory associations rather than simply trying to dampen the symptoms themselves, which doesn't solve the problem of future anxiety.

It is difficult to become completely anxiety-free if these anxiety associations exist in the memory. Medication cannot eliminate these associations and none of the recognized therapies can remove them, as they primarily work with thought processes rather than memory

Directly. However, some therapies work with indirect memory associations, but not in a way that can change or remove them. Of course, medication and therapy help many people for various reasons, but it is often insufficient.

These memory associations can create a perception of illness in our minds, making it difficult to become anxiety-free. They can lead to negative self-talk, such as "I have anxiety" or "my anxiety", which can trigger new anxiety thoughts. Negative self-talk is a major obstacle to overcoming anxiety.

The feeling of illness comes from symptoms that make us feel physically or mentally ill. All symptoms arise from the body's own chemistry.

Removing the memory of anxiety discomfort that creates our anxiety thoughts stops the illness conviction and the likelihood of becoming anxiety-free increases significantly.

The anxiety process is as follows:

Anxiety symptoms → Reaction → Behavior → Memory associations → Thoughts → Renewed anxiety symptoms → Identical reaction → Identical behavior → New memory associations - new thoughts etc.

The Cognitive Diamond: Thoughts, Emotions, Body and Behavior

Thoughts create feelings which then create a reaction which eventually creates a behavior. For example, you panic.

As you can see, Cognitive Therapy doesn't address memory associations, which is a problem as they create the continued anxiety via the memory thoughts created.

Everything will be elaborated.

With that in place, we can continue.

Experiment: An exercise for the reader

If you have been diagnosed with anxiety, there is an experiment you can try before you read on. This exercise is not meant to diminish anxiety issues, but there is a specific intention behind it.

Take a piece of paper and write: "I am not sick". Hold this paper in one hand as you continue reading. The exercise is designed to challenge the beliefs that support anxiety.

The purpose of the experiment will be explained later. If you don't want to participate, you can skip this step.

For those without an anxiety diagnosis, participation is voluntary, but it is possible to try the method to gain insights.

This is knowledge that is not widespread. Treating anxiety often involves treating our fear of further anxiety. This may explain why it can feel limited to focus on symptoms and thoughts, as these are often not the problem itself.

To achieve anxiety freedom, it is necessary to understand the causes of anxiety attacks and especially the factors that maintain anxiety after the initial symptoms have been misinterpreted.

Without knowing the cause of the anxiety and the mechanisms behind the discomfort and fear of further anxiety, it can be difficult to identify the changes needed to become anxiety-free.

It's important to note that medication alone will not eliminate anxiety. The fear of more anxiety, thoughts about the anxiety and tendencies to monitor your symptoms are likely to continue. In addition, there may be a fear of forgetting to take the medication.

Assume, hypothetically, that there are at least two theories about anxiety.

A traditional theory focuses on illness and suffering. This theory believes that irrational anxiety is deeply rooted or linked to past trauma or other psychological factors and that anxiety requires treatment because it can negatively affect a person's quality of life and ability to function. This view is supported by the fact that anxiety can be caused by genetics, social conditions or chemical imbalances in the brain.

All the above may be relevant to the cause of the initial experience of anxiety, but not to the subsequent anxiety for which we seek treatment, which is the discomfort. It is a fact.

The diagnosis or cause of the first anxiety episode is irrelevant in this context. Subsequent anxiety will always be feared, which is the main problem of irrational anxiety: Fear of repetitive anxiety.

Anxiety is equally uncomfortable for everyone as it involves the same chemical processes across individuals. Anxiety doesn't consider diagnoses, psychology or diseases, its sole focus is to create discomfort so that the individual reacts.

The problem occurs when anxiety is not acted upon. When irrational anxiety is allowed to overwhelm the person without action, it often results in panic. The memory stores this initial anxiety experience because the response was panic rather than action.

The initial trigger for the anxiety is therefore not the same as the subsequent triggers. The continued anxiety is mainly triggered by the memory of the previous discomfort caused by the panic reaction during the first experience of anxiety.

After years of experience, we have identified several steps to follow to overcome anxiety:

- The first step is to accept that irrational anxiety does not necessarily mean you are sick.
- The next step involves learning to suppress anxiety attacks when they occur. This is necessary as anxiety thoughts will continue to appear unless you actively take measures to avoid them.
- The third step is to reduce the focus on the anxiety as much as possible. Therefore, immediately after the first anxiety attack, some strategies should be implemented to minimize or avoid anxiety thoughts in the future. These strategies are explained throughout this book.

Chapter 2: Intro

All anxiety has one common denominator: **discomfort**.

Whatever the cause of discomfort, the underlying mechanisms are always the same: chemical processes.

Anxiety is the same for everyone. It's a misconception to think that one person's anxiety is unique or more severe than others. While the cause of anxiety may vary, the feeling of anxiety itself is the same. The chemical processes behind anxiety, such as adrenaline and cortisol, are universal to everyone. The symptoms may be different, but the core of anxiety symptoms is always the same: uncomfortable body chemicals. It's this discomfort that creates fear and the need for treatment, not the cause itself.

This understanding is important as it indicates that it is possible for everyone to become anxiety-free again. The path to overcoming anxiety is no more difficult for some than for others because the nature of anxiety is the same for all people.

Anxiety occurs due to misinterpretation of the initial symptoms. Since humans biologically store unpleasant experiences, anxiety can become a permanent part of consciousness and lead to thinking about it a lot afterwards.

By focusing on the underlying mechanisms of anxiety rather than the specific symptoms, more effective methods can be developed to manage and overcome anxiety. It is recommended not only to treat symptoms to alleviate the anxiety symptoms, but also to work on processing the associated memories. An appropriate time to start this memory work may be during the 6-8 weeks of waiting for any effects of prescribed medication, i.e. as soon as possible after the first experiences of anxiety.

This book will show how this can be done.

Do you have an anxiety diagnosis?

Are you still experiencing anxiety symptoms? Has no treatment helped you? Are you losing hope of becoming anxiety-free?

Questions you might be asking yourself: Why haven't I become anxiety-free yet? Is my anxiety different? Why doesn't any treatment work for me? What results have I achieved with traditional anxiety treatments? Why didn't it work and what can I do now?

If any of these questions feel relevant, you're not alone. Many people ask similar questions over longer periods of time. It's important to understand that anxiety only exists when it is allowed space in your mind.

Understanding anxiety: Questions about the nature of anxiety

What triggers irrational anxiety and why do we experience it? Irrational anxiety is closely linked to our ability to think. Is it a protective mechanism or just a random consequence of thinking?

If you see anxiety as something unpleasant to be avoided, it can be difficult to manage. The problem with anxiety is always its discomfort. This book will explain the discomfort and show how you can learn to avoid it.

Let's be clear: We go to the doctor because anxiety is uncomfortable and frightening. We seek help to avoid future anxiety and discomfort, backed by scientific facts.

People can experience irrational anxiety during life challenges and illness, as both challenge us mentally.

There is no scientific evidence to treat or categorize the experience of irrational bodily discomfort in challenging situations as a disease. The reaction to this discomfort is often considered abnormal, even though it can be considered a normal rational reaction to an irrational feeling of discomfort.

Irrational anxiety is therefore not considered a disease but is often diagnosed and treated as such because professionals look for symptoms of illness to make a diagnosis. It is the reaction to the anxiety chemistry that can be misunderstood as symptoms of illness, as this reaction is considered irrational from a medical perspective, even if it is not necessarily so from a chemical perspective.

Irrational anxiety is not perceived as a mental illness per se but is seen as such by doctors (psychiatrists) due to individuals' irrational behavior in response to irrational anxiety symptoms. As no physical symptoms are observed, it is often assumed to be mental. However, all anxiety symptoms and the related thought challenges can be explained by the body's internal chemistry.

There is nothing psychological about irrational anxiety, except that it is perceived as unpleasant, which can lead to inappropriate reactions.

Chapter 3: Understanding anxiety

I have learned the following from experiencing anxiety symptoms: If you can think it, anxiety can create it. There is no symptom that anxiety cannot create. Fortunately, symptoms are not reality, but just that, symptoms. There is nothing wrong with you just because you experience all kinds of symptoms.

Irrational anxiety is special. It's driven by fear of more anxiety once you've experienced it. Not by illness or anything else. Anxiety makes you afraid, as the only mental health diagnosis, therefore it is special and cannot be compared to other mental health diagnoses. Perhaps anxiety is not really an illness at all, but simply a rational fear that arises after experiencing an irrational anxiety discomfort.

Irrational anxiety only exists within the individual. Anxiety does not exist in the situation itself, the object or the diagnoses, which only act as triggers. Therefore, no situations are inherently dangerous or threatening. It is only thoughts about a situation that trigger new symptoms due to memories of previous unpleasant experiences in similar situations or places.

Irrational anxiety is thus an internal memory created by past experiences. It is these memories that create future anxiety thoughts, not illness. It is these thoughts that can become a disorder, not the anxiety itself. The disorder only arises because of our memories of past anxiety. Therefore, these memories must be "erased" so that no more anxiety thoughts arise.

Unfortunately, there is only one way to do that. By not thinking about the anxiety anymore. Of course, that's easier said than done. That's why I'm going to walk you through how to do it.

In our experience, because we have created the anxiety ourselves through our initial and subsequent misinterpretations of the symptoms, we are also able to reinterpret these misinterpretations as the process is the same. As this process is cognitive (and therefore conscious), the same mechanism can be used to break the anxiety by reinterpreting the misinterpretations. However, it takes time, attention and

training to implement this change systematically as anxiety is very stubborn.

Everything will be elaborated and explained.

Let's continue to test your anxiety knowledge.

Why didn't we have anxiety before we experienced it for the first time?

Before the first experience of anxiety, anxiety did not exist in our **consciousness** because there had not been a triggering event to activate the chemical processes we associate with anxiety.

When the brain is first exposed to a particular threat, it stores this experience as a reference for the future. This allows anxiety to arise in the future as a mechanism to avoid danger, purely because of past experiences and not necessarily because of a current threat.

In principle, we cannot experience anxiety until we are faced with a situation that activates this mechanism.

The experience of anxiety is solely due to biological reactions and chemical processes, not disease.

Anxiety is a biochemical response that we become aware of because of its discomfort.

Anxiety cannot be avoided if there is an active memory of past unpleasant experiences.

Here is a text that encourages reflection on anxiety.

Anxiety is not linked to a specific situation or object. Anxiety does not exist in the supermarket, the living room, the car, the bus, the train, the podium or the classroom. Anxiety exists inside the individual and is stored as unpleasant associations based on past experiences. It's not the situation itself that creates the anxiety - it's the memory that brings the anxiety into the situation. If the fear exists in the memory, it will be present everywhere.

Note: Individuals did not know anxiety until they became aware of its existence after the first anxiety experiences. Anxiety occurs when we become aware of its discomfort.

This text simplifies and does not intend to belittle the complex biological responses, thought patterns and external factors that create anxiety. It is designed to provoke reflection on the question: **Would we experience anxiety if we had no memory of it?**

We assume that anxiety memory exists because we consistently experience anxiety in the same situations repeatedly. We therefore assume that this can only happen if we possess memories of these situations.

It should be noted that these are assumptions as I have not been able to find concrete evidence, that support this view.

Why is anxiety diagnosed?

Anxiety diagnoses are primarily based on the individual's subjective experiences, i.e. what we report to the doctor, rather than on proven objective, physiological abnormalities, as professionals often assume.

Diagnoses are mainly made for the purpose of medical treatment. There are no rational reasons for diagnosing anxiety, as irrational anxiety relates to natural but unpleasant symptoms and feelings.

Understanding irrational anxiety

Irrational anxiety is a problem as it often stems from our own fear of experiencing further anxiety.

Whatever symptoms you may be experiencing are brought on by your conscious or unconscious thoughts to avoid past unpleasant, irrational anxiety experiences.

Every time we experience irrational anxiety; we strengthen the mental connections between anxiety and memory.

Irrational anxiety always triggers the same symptoms due to the similar chemical process behind it. This phenomenon is unique in that it primarily relates to an irrational chemical imbalance, which distinguishes it from other mild psychiatric diagnoses. Therefore, irrational anxiety should be considered a separate condition with an unpleasant experience that cannot be compared to other diagnoses.

Who is misinterpreting?

Misinterpretation of anxiety symptoms is typically seen in people who are already in a challenging life situation. It's not about job, intelligence or social status, but about the emotional state one is in at the time the anxiety is first experienced. An unemployed person with a positive mind is unlikely to misinterpret the symptoms, while a wealthy person with major personal problems may be more likely to do so.

Could genetics play a role?

While genetics can be a factor, it's not a guarantee of developing anxiety. Even with a genetic predisposition, it is your life situation and how you deal with the symptoms that determines whether anxiety becomes a problem. Anxiety can be avoided if you don't misinterpret the bodily reactions you experience. It's essential to understand that genetic predisposition does not mean that you automatically develop anxiety or other mental health problems.

Consciousness and heredity

Irrational anxiety is not necessarily hereditary, as it can arise because of individual patterns of consciousness and interpretations of symptoms. Consciousness is unique to each person and varies from individual to individual, meaning that no two people will ever experience the same thing in the same way. Anxiety experiences will therefore be different for everyone.

However, anxiety can be triggered by social heredity.

Anxiety consists of several elements that influence each other and contribute to anxiety, including the memory of anxiety, the fear of further anxiety and the discomfort of anxiety attacks.

As mentioned, I always distinguish between first-time anxiety and subsequent anxiety as they are two very different things. First-time anxiety always comes as a surprise. We are not in control of it. But we can eliminate subsequent anxiety if we handle first-time anxiety right from the start.

What is anxiety and what isn't anxiety?

There are different types of anxiety. Rational anxiety and irrational anxiety differ significantly from each other.

Therefore, you should say, "I'm experiencing irrational anxiety" or "I feel adrenaline in my body" or "I feel unpleasant body chemistry", as anxiety is primarily a chemical reaction in the body.

Fear is two things.

The first form of anxiety is always a reaction to life circumstances. Subsequent anxiety often arises as a fear of more discomfort.

Rational anxiety has a visible cause. Irrational anxiety has no visible cause. Rational anxiety is experienced in danger. Irrational anxiety is experienced during challenges in life.

Anxiety is a reaction to fear. The problem arises when individuals experience fear of situations that are considered harmless by others, such as phobias or imaginary threats. Anxiety itself is not a symptom, disorder or disease, but part of the body's chemical processes. It is the anxious thoughts that can develop into a disorder, not the feeling of anxiety itself.

It is the actual experience of extreme discomfort that makes anxiety problematic for many individuals, rather than the cause behind it.

What is anxiety?

The definition of anxiety can vary depending on who you ask. While worry is not necessarily the same as anxiety, they are often linked. A challenging life situation, event, change or lifestyle can be a frequent cause of first-time irrational anxiety.

When people refer to anxiety with words like "my anxiety", "I'm anxious", "I have anxiety", "anxiety diagnoses" and "anxiety symptoms", they are typically referring to irrational anxiety. Unlike rational emotions, irrational anxiety has no known purpose. It is a byproduct of the human ability to think. Without thoughts, there would be no irrational anxiety, as all forms of irrational anxiety have a trigger. Most of the time, it is our thoughts that trigger further irrational anxiety.

As people can imagine different scenarios, irrational anxiety can occur in many different situations. These situations are often categorized into different diagnoses, but the essence of the anxiety does not change. Anxiety is experienced as unpleasant, regardless of the cause, and therefore treatment should be consistent regardless of the specific trigger.

The body is so intelligent that it uses irrational anxiety as a warning in non-life-threatening situations such as stress, overthinking, speculation, worry and other life challenges. This happens when the body decides it needs a break from speculation.

When this happens, you experience symptoms of irrational anxiety, which causes you to stop speculating. Unfortunately, irrational anxiety can subsequently create other problems for us. But the original purpose was to shift the focus away from the speculation to the symptoms.

Of course, it's more complicated than described here. It is essential to distinguish between rational and irrational anxiety as they differ significantly. In the future, if you experience anxiety, you should refer to it as **irrational anxiety**, as it sounds less scary.

The same principle applies to diagnoses that should all be referred to as **irrational anxiety diagnoses**. For example: *I have irrational social anxiety. I have generalized irrational anxiety. I have irrational health anxiety.*

Irrational anxiety is defined as: Anxiety is a feeling of worry, nervousness or unease about something with an uncertain outcome. It is a natural reaction to stress and can be beneficial in some situations, but for some people anxiety can become overwhelming and disruptive in their daily lives. It can be genetic, socially inherited, brain imbalance, etc. This was the normal anxiety version we always hear. Here is a different version.

Anxiety in a different version.

Anxiety is related to chemical processes in the body. Joy, anger and other emotions are also the result of chemical reactions. While some chemical reactions, like the release of dopamine, can be pleasant, others, like adrenaline, can be less pleasant.

Irrational anxiety is one of the emotional states perceived as unpleasant. It can lead to a fear of the feeling of anxiety itself again. The question is whether this fear is psychologically related to the discomfort of the chemical reactions in the body.

It is relevant to investigate whether anxiety becomes a recurring problem because of its classification as a mental disorder or because previous unpleasant experiences with anxiety are stored in memory.

Let's investigate it.

Anxiety, both rational and irrational, is caused by chemical reactions in the body, including the release of adrenaline, noradrenaline and cortisol. This release happens when the amygdala signals the adrenal glands to produce these substances. These chemicals are then transported through the blood to various organs that are receptive to them. Without the presence of these substances, anxiety and its associated symptoms would not occur. It is the chemical composition that forms the basis of the anxiety experience.

Adrenaline works like this:

Adrenaline, also known as epinephrine, affects several organs and systems in the body. These include:

- Heart: Increases heart rate and pumping power, resulting in an increase in blood pressure.
- Lungs: Expands the airways (bronchi) to improve oxygen delivery.
- Liver: Stimulates the breakdown of glycogen into glucose, increasing blood sugar levels.
- Muscles: Improves blood flow to skeletal muscles, increasing muscle strength and performance.
- Eyes: Dilates pupils to improve vision during stressful situations.
- Digestive system: Reduces blood flow to the gastrointestinal tract, which decreases digestive activity.

The function of adrenaline is to prepare the body for a "fight, flight, freeze or hide" response, helping to deal with sudden dangers. This happens automatically without the possibility of conscious direction or control. When adrenaline is released in the body, it cannot be stopped, but fortunately it leaves the body quickly and everything returns to normal.

Irrational anxiety feels uncomfortable because so many organs are affected simultaneously. It is experienced as a major discomfort due to the various physical sensations that occur heart palpitations, breathing problems, altered field of vision, etc. These symptoms occur quickly and can be frightening, especially when there is no obvious cause for the adrenaline release.

In rational anxiety, these symptoms are rarely noticed as there is an identifiable cause that the person can act on. The chemistry of anxiety causes a marked change in body state, which is referred to as an **anxiety state**. There are many such body states, such as the 'sour' or 'angry' state, where the body may shake with anger, and the 'love' state, where the body may quiver with joy. All these states (emotions) are created by body chemistry.

Anxiety is the only emotion that can arise irrationally, which makes it problematic.

Fear of anxiety: An explanation.

The current understanding of anxiety is based on professional definitions, but new knowledge can change this perception. A challenge arises when treating initial and subsequent anxiety in the same way. Treatments that focus on the genetic, social or biochemical causes of initial anxiety, is also applied to later anxiety episodes, although the causes may be different. The mistake lies in treating subsequent anxiety as if it has the same causes as the first experience.

Today's treatments focus on genetics, social conditions, brain imbalance or trauma, even though continued anxiety is caused by fear of more anxiety. Therefore, new therapies and treatments are required to stop subsequent anxiety.

An important point.

We only fear anxiety symptoms because we know what they are from memory.

Anxiety can be exhausting as it involves a battle against the body's own chemical reactions. We are faced with two systems: the anxiety, which is designed to be unpleasant, and the desire to avoid this discomfort.

A typical anxiety attack lasts between 2-5 minutes, which is the time it takes for adrenaline to be broken down in the body. However, full calm only comes after about half an hour due to other substances like cortisol that take longer to metabolize. Fortunately, the unpleasant feeling from the adrenaline is quickly over. It's important to remember that anxiety is a temporary state that we only experience while the chemicals are present in the body.

How anxiety arises

The first experience of anxiety is a natural reaction to an unfamiliar situation, bodily sensations or challenges in our life situation. If this first experience is misinterpreted as dangerous or uncontrollable, it can form a deep imprint in the memory. This imprint stores both the fear and the reaction, which is later activated repeatedly through memories of the discomfort.

Without these stored memories, there would be no subsequent anxiety.

Anxiety is often seen as a disease or a complex psychological condition. It is the way we store and react to the first memory that can contribute to anxiety. If the first memory was stored or interpreted neutrally, it could reduce subsequent anxiety.

This doesn't mean ignoring how anxiety feels, but it can be helpful to focus on understanding and processing the stored memories. This can become a key to managing irrational anxiety.

Counterarguments and their explanation

Some professionals believe that anxiety is caused by biological factors such as genetics, brain chemistry or life stress. But even these factors require an initial experience that the brain interprets and stores.

Whether the cause is a physical reaction, an external stressor or a specific situation, the memory storage and interpretation of this first experience plays a key role. It is the stored anxiety memories that are the source of anxiety's persistence.

A solution without morbidity

Instead of diagnoses and medication, we should focus on understanding and processing the first anxiety experiences. By changing our understanding of anxiety, we can break the cycle by "removing" the first anxiety memories.

Re-cap:

The first time we experience irrational anxiety; the brain misinterprets all symptoms because it is not prepared. Anxiety only exists because of previous memories. Subsequent anxiety is impossible without those memories.

If the first experience of anxiety is ignored, nothing dangerous is hidden and life continues without problems. If the initial anxiety is misinterpreted, it is perceived as dangerous, and you are kept in an anxious state. By addressing the root of continued anxiety - the first memories and our interpretation of them - you can begin to break the cycle. **This requires a new understanding, courage and willingness to challenge old patterns of thinking and assumptions about illness and disease that have not resolved anxiety.**

Anxiety can be reduced by processing the memories, regardless of how long you've had it and what diagnosis you have or receive. After the anxiety memories have been processed, you may of course experience anxiety again. In that case, it is experienced as the first anxiety again, as there are no stored anxiety memories.

To understand and manage anxiety, start with the first anxiety experience that was misinterpreted. This is where the problem initially arises.

We will therefore focus on removing the stored anxiety memory.

How do you remove a memory recall? It can be done by not triggering and thus thinking about it. This involves different steps, all of which will be reviewed.

Summary: Whatever your anxiety symptoms or diagnosis are, they probably have their root in memory. This can be concluded because these challenges probably did not exist before your first anxiety experience. This disregards biological, genetic and environmental factors.

Chapter 4: Anxiety info and important anxiety knowledge

Reflection questions:

- What has caused your irrational fear?
- Why are you experiencing new symptoms?
- Should irrational anxiety be treated? If yes, why?

We treat broken bones, toothache and cancer because they are life-threatening or painful.

So why treat irrational anxiety when it's "only" unpleasant? What makes anxiety so severe that it requires treatment? Think about it.

Determining which topics to include in a book on anxiety can be challenging, as anxiety is experienced individually and can vary greatly between people. Therefore, this book is designed to focus on the topics that, according to years of experience, have had the greatest impact on the understanding and management of anxiety. All topics relate to why and how anxiety is maintained after the first irrational anxiety experiences.

Have you ever wondered why we don't just experience Irrational Anxiety once and then it's over like rational anxiety? That's one of the answers you get in this book.

This book highlights the need for mandatory anxiety education in schools, as proper knowledge can reduce future anxiety in young people.

The cause of continued Irrational Anxiety includes:

- Our memory of the uncomfortable anxiety of the past.
- Our reaction to feelings of anxiety.
- Our thoughts about unpleasant anxiety experiences of the past.
- and especially our beliefs and "self-talk" about being sick when we experience anxiety.

Everything is written to be easily understood by adults. As anxiety can be complex, some chapters may seem "technical", and you may need to reread them. You may not agree with everything described as it may be new to you or go against your own understanding of anxiety. However, this does not mean that it is incorrect, just that you have a different opinion. All text is double-checked for correctness.

Generation-anxiety.com works to ensure that future generations are informed about anxiety so they can avoid it through rational thinking if they experience it. The goal is to prepare everyone on how to deal with anxiety, so it doesn't become a problem in the future. By reducing the need for treatment, resources could be redirected to prevention and education, which in turn would help prevent the development of anxiety disorders in the first place.

Anxiety occurs when the brain assesses something or a situation as dangerous. Therefore, anxiety always has a cause, also known as a trigger. Anxiety is not unmotivated, as some professionals claim in the case of panic disorder. Panic disorder also has a rational cause and trigger.

Anxiety with no obvious cause. Is it possible?

Anxiety symptoms cannot be triggered without a reason. Experiencing an anxiety attack without any obvious cause is therefore not possible, even though it may feel that way. Nor can you get angry or happy without an underlying cause, although sometimes it may seem that way.

All our emotions and symptoms are triggered by a cause. The cause may be unconscious and thus seem to come out of the blue. These unconscious causes are individual and diverse, so they will not be discussed here.

Just be aware that anxiety symptoms are never felt without a cause.

This knowledge can be used prospectively to analyze the symptoms of anxiety retrospectively. What was I doing, what was I thinking and what situation was I in when it happened? In general: Under what circumstances do I experience symptoms?

The brain's assessment of danger can include any factor. Typically, these are things that the brain has learned to consider dangerous through your past reactions to certain situations or objects. What was misinterpreted in the past can cause problems in the present and future. Examples include misinterpreting driving, riding the bus, social gatherings, giving lectures, standing in line or shopping. The list goes on and on.

We work with three types of anxiety at Generation-Anxiety:

- **Rational anxiety** occurs when you are in real danger, which typically triggers an instinctive fight-or-flight response.
- **Irrational anxiety** is experienced in challenging situations without a direct physical threat. It is triggered by thought patterns and because it is thought-based, it can potentially be controlled.
- **Anxiety-like anxiety** refers to symptoms that occur between episodes of Irrational Anxiety. This is the state of "feeling anxious" or saying "I have anxiety," even though there is not necessarily a true anxiety reaction going on. The difference here lies in the body's chemical composition: in rational and irrational anxiety, adrenaline is released, while in anxiety-like anxiety it is primarily cortisol that dominates.

It is well known that anxiety is considered a disorder. All existing evidence points to anxiety being a condition that requires treatment. But why do we use the term 'evidence' rather than 'science'?

How would anxiety be defined if it wasn't considered a disease?

However, this question has never been thoroughly investigated as current treatment methods are primarily based on professionals' assumptions about anxiety.

What could anxiety be if we assumed it wasn't caused by genetics, brain imbalances, trauma, social conditions, psychological conditions or other recognized causes.

Let's examine this hypothesis.

Consider the following statements:

Anxiety is not a disease.

This is a provocative statement. Let's explore and test the hypothesis that anxiety is not necessarily a disease.

If I allow myself to make such a claim, it's because I've lived with anxiety for about 40 years. I've tried everything in anxiety. I know what it is. I've lived it, felt it, hated it and cursed it.

Today I realize that I have never been sick because of anxiety, and the same goes for you. We only perceive anxiety as an illness because the chemical reactions in the body create unpleasant symptoms to which we react irrationally.

This may seem harsh to some, but irrational anxiety occurs because we repeatedly recall memories of the anxiety every time we think, talk, read, hear or write about it. This creates a self-reinforcing spiral, as the symptoms would be less prominent if we didn't focus so much on the anxiety.

However, it's perfectly normal to think and talk about anxiety. Everyone who experiences anxiety does this because biologically we are trying to avoid discomfort. Therefore, the uncomfortable feelings of anxiety trigger our thoughts.

Just be aware that not thinking, talking, reading, hearing or writing about anxiety can significantly reduce symptoms.

Let's assume, from a non-medical point of view, that irrational anxiety is not necessarily a disease or disorder that requires treatment, but rather a reaction to our life situations and possible misinterpretation of them. Scientific studies show that anxiety and discomfort are caused by the release of adrenaline in the body.

Therefore, this discomfort cannot be categorized as a disease as it is a result of the body's chemical reactions. Panic arises as a natural reaction to the discomfort created by this chemical process.

When we consult a doctor afterwards, it's primarily because of the fear and discomfort generated by the chemical processes and not necessarily because there is an underlying illness.

All anxiety discomfort (the symptoms) is thus created by chemistry and not disease. In some cases, the initial trigger may be disease-related, but this is not the norm. The real problem often occurs after the first anxiety attack.

To understand why we experience repetitive anxiety, we need to divide anxiety triggers into two categories.

The first experience of anxiety often has an external trigger, such as a stressful or challenging life situation. Subsequent anxiety attacks are typically triggered by internal psychological factors, such as negative thoughts, memories of previous anxiety attacks and fear of experiencing further anxiety. After the first anxiety experience, the initial cause becomes less relevant as the focus shifts to the fear of recurrence.

The fear of experiencing more anxiety becomes the future problem.

Thus, there are two different causes that trigger the first anxiety, which may be related to illness, and the subsequent anxiety, which is not related to illness. This claim is easy to prove.

The first anxiety symptoms or anxiety attacks we experience cannot be prevented. The first anxiety comes unexpectedly, and we are not prepared for it. We don't see it coming. **It is different from the subsequent anxiety that we often expect.**

How we react to this initial anxiety is crucial as it affects our future experiences with anxiety. It will determine whether the subsequent anxiety becomes a persistent problem.

However, it can be challenging to remain rational and ignore the initial anxiety, especially if you are already facing other life challenges. That's why around 8-10% of people are subsequently diagnosed with anxiety.

Being diagnosed with anxiety is not a sign of weakness. Often it can be due to a minor misinterpretation, a moment of weakness, lack of concentration or life circumstances. There are many possible reasons why anxiety can be misinterpreted the first time. It is also possible for intelligent people to misunderstand anxiety on first encounter, which shows that it is not related to IQ.

It's important to understand that receiving an anxiety diagnosis is completely normal.

Anxiety is often referred to as a disease because of our irrational reactions and behaviors related to the symptoms, including the chemical processes in the brain.

When looking at anxiety from a non-medical perspective, a general treatment approach can be envisioned by applying rational and logical thinking about the problem.

A doctor and a layman have different approaches to anxiety. Doctors are trained to identify symptoms in accordance with established diagnoses.

Consider this: If you were to find a cure for irrational anxiety, where would you look? Towards more medical treatments, therapy, information or something else entirely?

A layman might search for non-medical causes and reflect on questions like: What was I experiencing? Where did it come from? Why did it occur? What could be the logical explanation? Why was it so uncomfortable? Why did I become afraid of my feelings? Why did I react the way I did?

Why did my thoughts revolve around it afterwards? Why can't I think rationally about the anxiety symptoms? Why did I panic?

Our research and analysis of the anxiety process indicates that repetitive anxiety is primarily due to our natural reaction to an inherent fear of discomfort. This suggests that anxiety is not necessarily a mental illness, even though it may seem like it.

When medicine and cognitive therapies were developed, it was not even considered whether there could be a natural, non-medical, explanation for the repeated irrational anxiety. Which is natural if you're a doctor.

They only looked at the symptoms people presented with and what they described about the symptoms. Doctors were puzzled by the reactions and behaviors patients exhibited when experiencing anxiety symptoms and especially their behavior afterwards. And they can easily be mistaken for real symptoms of illness.

Many people aren't aware of it, but we have an encoded mechanism that helps us avoid discomfort. This applies to all discomfort, not just anxiety-related discomfort. It is this mechanism that is activated after a first anxiety attack and causes you to seek medical attention, as the body wants to avoid further discomfort.

So really, it's signals from this function that make you go to the doctor, not the discomfort itself, but the desire to avoid more discomfort.

It's unlikely that you would go to the doctor if your anxiety wasn't uncomfortable. If you didn't feel discomfort, why would you do it?

Anxiety is an emotion associated with chemical discomfort. This can be seen in that if the chemical reaction is removed, there is no anxiety left.

In short, future anxiety occurs because the first anxiety experience is misinterpreted, causing the brain to store the experience as negative and unpleasant, something that should be avoided in the future.

The initial and now stored anxiety experience later activates our thoughts to find a solution to avoid further discomfort. However, these thoughts often create new symptoms.

So, from experiencing initial anxiety due to an **external** factor in our life situation, we experience anxiety in the future due to an **internal** factor, namely our encoded fear of discomfort.

Anxiety can cause all symptoms

Anxiety can cause a variety of symptoms without limits. However, this does not necessarily mean that it is always anxiety. It can be seen as a side effect of living with anxiety, as persistent negative thoughts can provoke various symptoms of illness, constantly looking for signs to avoid further anxiety discomfort.

This happens because of the anxiety challenges in one's life situation, which is influenced by memories of previous unpleasant experiences of anxiety. These memories create a negative life situation. It is difficult to think and act positively when experiencing anxiety symptoms. Therefore, all kinds of symptoms can be experienced if you are convinced that you have an anxiety disorder.

Anxiety is poetry.

The stories that anxiety creates through your thoughts about the same anxiety are significantly more frightening than reality. Anxiety tends to exaggerate symptoms as a protective mechanism, causing you to notice them constantly. Whatever symptoms you experience, you immediately think: **Is it anxiety?** This thought arises because you want to avoid the discomfort again. Your entire mindset is focused on how to avoid further anxiety experiences.

Resume.

It all comes down to the following:

To overcome anxiety, it is necessary to change our fear of experiencing it again.

The fact is that you don't live with anxiety, but with the thoughts and fear of experiencing anxiety symptoms again. It's the thoughts that can become a disorder, not the anxiety itself. All the experiences associated with anxiety are due to the emotions that our body chemistry creates.

After the initial anxiety experience, it's only the fear of further anxiety that leads to continued anxiety experiences.

Chapter 5: Following Irrational Anxiety: The Five Causes

Our beliefs

The perception of anxiety and illness plays a central role in the maintenance of irrational anxiety. When anxiety symptoms are interpreted as signs of illness, fear and worry can be amplified. This perception can create a cycle of self-perpetuating anxiety. For example, palpitations, a common anxiety symptom, can be interpreted as a possible heart attack, which can increase anxiety and confirm the fear that something is wrong.

Our memory of anxiety

Memory plays a significant role in repeated experiences of anxiety and the way anxiety is experienced. After an anxiety experience, the experience itself, as well as the reaction and behavior to it, is stored in memory. Future situations that are like the original anxiety trigger can trigger a similar anxiety response.

The discomfort of anxiety

Anxiety symptoms are often extremely uncomfortable. This physical discomfort can be so intense that it leads to a fear of the symptoms themselves. This fear increases our attention to the body's signals, resulting in a constant monitoring for signs of symptoms. This process creates a self-perpetuating cycle where increased attention to symptoms leads to further anxiety.

The fear of anxiety

IMPORTANT: The fear of anxiety, also known as anxiety of anxiety, occurs when we start thinking about experiencing anxiety again.

This fear manifests itself immediately after the first anxiety attack. It can be so pervasive that the mere thought of anxiety can trigger anxiety symptoms, confirming the fear and creating a self-perpetuating cycle. This often leads to an automatic avoidance of situations, places and activities that have previously triggered anxiety, ultimately limiting our daily lives. This behavior is referred to as avoidance behavior.

Our word choice on anxiety

Words and language have a significant impact on our thoughts, feelings and actions. Using negative terms to describe anxiety or you can perpetuate and reinforce anxiety. Statements like "I have anxiety", "My anxiety" or "I am anxious" can result in exacerbating the feelings of anxiety. By adjusting our word choice and using more positive or neutral phrases, we can change our thought patterns and significantly reduce irrational anxiety.

Negative self-talk has a greater effect on us than you might think and contributes significantly to persistent anxiety. It's challenging to achieve anxiety freedom if you constantly use statements like "I have" or "am anxious".

Summarizing

To manage irrational anxiety, we need to change our beliefs about anxiety. If we understand and adjust just one or two factors such as memory, discomfort, fear or word choice, we can break the vicious circle of anxiety. This is an effective way to reduce anxiety.

Taking ownership of anxiety

Anxiety is not a permanent part of your identity. Instead of seeing it as something you have or are, it should be seen as a scientifically temporary chemical reaction in the body. The presence of symptoms is often described as anxiety.

Many people refer to "their" anxiety with statements like "I have anxiety" or "my anxiety." This association can make it difficult to separate from anxiety as it becomes perceived as an integral part of one's self-image and creates a belief that the condition is permanent.

Therefore, it is recommended to change the way you talk about anxiety to promote the possibility of being free from it.

The way forward

To overcome irrational anxiety, it is important to change misconceptions about the anxiety or illness. The first step in this process is to stop thinking negatively about illness. Next, we will examine the beliefs about anxiety to understand how a negative perception of anxiety can keep a person in this state.

Waiting for an effect of medication

The time spent waiting for medication to take effect could be used more efficiently. How can we optimize the waiting time for the effects of anti-anxiety medication? This can sometimes take several months. Gaps between therapy sessions could also be used more constructively.

Positive thinking involves focusing on thoughts that are both real and rational, instead of those that have a negative impact. It is important to constantly remember that anxiety is not dangerous, otherwise we risk it taking over our state of mind.

It is inadequate to diagnose people with something for which we have no immediate solution. We should understand that all anxiety symptoms are the result of body biochemistry and not disease. This body chemistry is mainly controlled by our thought patterns. Therefore, it is crucial to stop negative thoughts rather than just change them.

The waiting period for the medication to take effect should be used to inform the patient that anxiety symptoms or seizures do not necessarily indicate illness. However, the problem is that a diagnosis is necessary for the doctor to prescribe medication, which classifies the patient as sick. This is where a

contradiction arises when using our method with diagnoses: the patient gets the message 'I'm not sick', while a diagnosis from the doctor suggests the opposite. Ideally, it would be appropriate to avoid making a diagnosis in the initial phase.

The truth about anxiety

It's our reaction and behavior to the feeling of anxiety that varies from individual to individual, not the feeling itself. No matter what type of anxiety you experience, the feeling will always be the same: unpleasant. When it is said that each person's experience of anxiety is unique, it means that our reaction to the feeling of anxiety is unique. This does not necessarily imply that all individuals should be treated differently for anxiety, as some practitioners claim. The feeling of anxiety is the same for all people, regardless of cause or diagnosis.

It is because of anxiety that we all experience fear of repetition, avoidance behavior and anxiety retention. **You can't have irrational anxiety without also developing a form of anxiety about the anxiety**, as anxiety about the anxiety is driven by the fear of further irrational anxiety. That's why it doesn't make sense to divide anxiety into different diagnoses. It will always be the fear of more anxiety that needs to be treated, not the cause of the anxiety experience. You don't consult a doctor because of the cause, but because of the discomfort the anxiety has caused.

Where does the fear of experiencing more anxiety come from? This fear of anxiety can theoretically be stopped if we can identify its location. The fear of anxiety originates in memory, where it is stored after the first anxiety attack as a reaction to the unpleasant feelings of anxiety. Now that it's clear that this fear is anchored in memory, we can explore how to remove it to avoid fear of the fear.

Anxiety about anxiety affects memory if it is active. This can be observed by comparing with people who do not experience anxiety. Anxiety can be reduced by changing the memory to contain a more rational and positive perception of the situation. However, this can be challenging as anxiety is a persistent emotion.

Memory stores many different beliefs and assumptions. "Belief" is used here because it describes what the fear of anxiety entails. This type of anxiety makes us believe that something will happen, even though it may never happen. It also creates the expectation that we will experience anxiety again in situations or places where we have experienced anxiety before. Therefore, these places are avoided, not because they are dangerous, but because the memory signals that they could be.

Now imagine that you didn't have anxiety experiences from the past stored in your memory. Would it be possible to travel there? Yes, it would. Without memories of a particular place, it would be possible to go there like any other person. This applies to all situations and places: supermarkets, buses, cars, open spaces, lectures, school, etc. Therefore, we can conclude that memories of past anxiety are the problem.

Anxiety lives in your memory and is with you all the time and everywhere.

Shopping, riding the bus, train or car, giving lectures or presenting in class are not dangerous, although these things can be triggers for anxiety. Memory monitors how you think and react to your surroundings.

The problem arises when anxiety focuses on the wrong thing, as in irrational anxiety.

This happens because it has been learned through reactions and behavior in previously harmless situations.

These places or situations are now stored in memory as potential dangers to avoid. Therefore, the brain constantly scans for similar places or situations, causing a feeling of unease when traveling outside the home.

Even the smallest similarities will now activate emotions because of the stored memories. These emotions are again stored in memory as false memories, only because you reacted to similar false memories in the past.

Therefore: It's not the situation itself that is the problem. The problem arises because of the fear of experiencing the feeling of anxiety in the situation. Thus, it is not the situation itself, but the fear of the feeling of anxiety that is the main problem.

So, both the fear of anxiety and the belief that you might be ill are now stored in your memory. These two challenges can make it difficult to become completely anxiety-free. Many recognized treatments for anxiety do not address these issues directly. Neither medication nor therapy that focuses on thought patterns can necessarily remove these beliefs. When treatment is successful, it's often due to other factors.

The function of anxiety is to protect us. For example, anxiety can lead to staying at home as it is considered safer. Fear of anxiety can tie you up at home as a protective mechanism. This behavior can be traced back to the reaction during the first anxiety attack: panic. Panic is a common reaction, but from a rational perspective it is less appropriate.

IMPORTANT: A thought cannot directly change a belief. If thoughts could, people would probably be anxiety-free by now. Once a thought is created, you cannot immediately think differently about it or change it. Thoughts are created unconsciously, so they cannot be consciously reduced or restructured. Since you only know your thoughts when they are already there, it is difficult to change them. It is also not possible to have two thoughts at the same time. Documenting thoughts or inner dialogs during the day doesn't change the thoughts the next time they occur either.

Many people experience improvement in anxiety through Cognitive Behavioral Therapy (CBT) and Metacognitive Therapy (MCT). However, it's not only working with the mind that contributes to this.

One belief can change another belief because beliefs are fixed memory images until they are changed. Whatever you are convinced of it is in your memory. Examples include belief in a god or political beliefs, which are typically hard to change, as opposed to negative beliefs, which can be easier to change.

Changing beliefs.

Negative beliefs can be changed into positive ones more easily than the other way around because people often seek out information that confirms their existing beliefs and avoid or reject information that contradicts them. This phenomenon is called **confirmation bias** and makes it more difficult to change a positive belief that people have actively chosen and seek to confirm, for example through prayer or church attendance.

Anxiety is associated with discomfort and suffering, which motivates us to change or remove this belief, as opposed to positive beliefs, which provide comfort, hope and meaning and are therefore harder to change. Positive beliefs, such as the belief in a god, are deeply rooted in an individual's identity and life experiences. These beliefs are closely linked to positive emotions and experiences, making them difficult

to change or abandon. In addition, there are external factors, such as fellow believers, that confirm and strengthen beliefs.

Negative beliefs such as "I'm sick" or "I have anxiety" are irrational and can change over time. Yet the process can be challenging and requires persistence. Anxiety is triggered by the limbic brain, which cannot think, but only register and react. Thus, rational (true) anxiety is activated when a danger is detected by structures like the amygdala. This explains why anxiety always has a trigger.

In irrational anxiety, it's your thoughts that trigger the anxiety. When thoughts of anxiety are stopped, it disappears. Pain works the same way - we forget about it when it's gone.

Whatever treatment you choose, it won't help unless you also change your beliefs about being sick and anxious.

Once we experience irrational anxiety, it affects our beliefs. **Although anxiety is not dangerous, the brain interprets it differently due to reactions such as panic and fear.**

Repetition of reactions

When anxiety occurs again, the memory will retain previous reactions as the correct way to handle the situation.

Your first experience of anxiety becomes a template for your future reactions and actions to similar anxiety events or symptoms.

Thoughts on anxiety

A negative interpretation of anxiety causes the brain to automatically generate thoughts about the situation to protect against further anxiety. This results in focusing on ways to avoid more anxiety. Unfortunately, this causes the thoughts to create new symptoms by activating the previously stored anxiety interpretation. Every time thoughts of anxiety arise that lead to new symptoms, this interpretation is reinforced, which in turn confirms the belief of suffering from anxiety.

This happens because the brain does not differentiate between rational and irrational anxiety. To the brain, anxiety is just anxiety, regardless of the cause. Therefore, when anxiety is thought about, the brain believes that there is a real danger and starts to produce symptoms so that action can be taken.

Example:

Imagine a person experiencing anxiety for the first time during an exam. The panic and fear associated with this experience is stored as a negative interpretation in the memory. In the next exam situation, the memory will automatically evoke the previous reaction of panic and fear, as the brain has learned that this is the appropriate response in the given situation. In fact, the mere thought of an exam in the future can trigger similar symptoms.

Tips for handling

Visualization exercise: For the next exam, an A4 sheet with the text "I am not sick" can help shift your

focus and remind you that you are healthy for the exam. It is recommended to keep the A4 sheet close to you, preferably with your exam papers and bring it into the exam so that it remains visible to you. You can hold the A4 sheet in one hand while you present.

Preparation: Start using the sheet a few months before the exam so that you gradually become aware that all you are doing wrong is having anxiety thoughts about the last exam. Many will probably doubt this method. That's exactly why you should try it out so you can see the effect for yourself.

Exposure: Always have a note with you when doing something that can be anxiety provoking. Use it as a background image on your tablet or mobile. Before you leave home, read the A-4 sheet aloud a few times: "I am not sick." Keep the sheet in your hand. On the street, read it again quickly: "I am not sick." When you arrive at the supermarket or other destination, read the sheet a few times again: "I am not sick." Walk through the front door with the sheet in your hand and say: "I am not sick."

You can now choose to continue or go home.

The power of conviction

The point is: How many times do you have to do this exercise before you believe that you can act without anxiety symptoms? It can be helpful to have posters in your home that say, "I'm not sick."

Note: This method does not work with your thoughts, but with your belief that you have anxiety. "I'm not sick" should remind you that you are not sick and shift the focus from the normal anxiety thoughts to the note in your hand.

By telling yourself that you are not sick, you indirectly signal that you don't have anxiety, as anxiety is considered a disease. The most important thing is to take the focus off anxiety by saying *I'm not sick* to yourself. This is why it can be effective. What do you prefer to say to yourself, *I'm not sick* or *I have anxiety*?

Both claims may seem contradictory at first glance. But is it possible? Is it possible to experience irrational anxiety and not be sick at the same time? Yes, it is entirely possible. The difference is that the anxiety will feel completely different without the accompanying feeling of sickness and thus be much easier to manage.

The method described also includes exposure, like CBT and MCT, but differs in that you don't have to manage all your anxiety thoughts and symptoms simultaneously. The method focuses on changing the perception of anxiety or illness. **It emphasizes that thoughts do not matter.** When this attitude is accepted, the thoughts will often diminish, which will reduce the symptoms and thus also the anxiety of the anxiety. It's all connected, when the main problem is dealt with, the other problems will follow.

What sets our method apart from other cognitive methods is that our method is also used outside the home.

We often learn theory at home, but forget it outside, where anxiety can crop up. This method helps you stay focused. Always have a note that says "I'm not sick" when you leave your home. The note helps to shift focus if anxiety thoughts arise. Having something in your hand increases awareness and makes it harder for anxiety to trigger. Mobile can also help, use a suitable background image. Next time you go out, try taking a note with you. The test works regardless of the content of the text.

Part 2: Analysis of Treatment Methods

Chapter 6: Anxiety Assessment

Anxiety can feel overwhelming in certain situations, especially when it occurs suddenly and without an obvious cause. To understand potential triggers of these feelings before seeking medical attention, the following questions can be helpful:

- What recent events in your life could have contributed to the sudden anxiety symptoms?
- What factors have been so stressful that they have triggered the anxiety symptoms?
- Have you experienced any sudden illness?
- Could this be a natural protection mechanism from the mind?
- Is it a result of prolonged negative speculation?
- Why do you feel the need to consult a doctor afterwards?
- What are your own thoughts on the situation?

These reflections can help identify possible causes and thus facilitate communication with a healthcare professional.

How thoughts create anxiety:

Negative thoughts tend to generate more negative thoughts. This is because the brain often seeks confirmation of the current emotional state. When a person feels anxiety or worry, the brain will typically find additional worries to confirm this feeling.

This explains why it can be difficult to think positively when experiencing anxiety. The brain is caught in a vicious cycle of negative thoughts and physical reactions. Anxiety thoughts affect the body and can lead to various physical symptoms.

Anxiety thus becomes a self-fulfilling prophecy as repeated anxiety thoughts provoke the same unpleasant chemical reactions repeatedly.

To create change in your life, you should be open to challenging your existing beliefs about anxiety as a disease. Just as negative thoughts can keep you stuck in a state of anxiety; positive thoughts can help you create a more positive future. Our method is designed to support this process.

Anxiety has been considered by philosophers such as Kierkegaard and Freud as a natural part of life that can be experienced by all people. They saw it not as a disease, but as an integral part of human existence. This perspective suggests that the anxiety we experience can sometimes be a reaction to internal or external conditions that require attention and understanding.

If this view is accepted, it is debatable whether irrational anxiety should always be treated simply because it is unpleasant. This begs the question: Which perspective is more justified, the philosophical or the psychiatric?

Could it be that anxiety represents something else entirely that we fail to recognize or accept because of our professional approach?

Chapter 6: Anxiety beliefs and Fear of more anxiety

The belief that you have anxiety creates the symptoms.

There are both positive and negative beliefs. Anxiety is a negative belief, while politics and religion are often considered positive. Many people have an anxiety belief, as I did for many years. However, this does not necessarily mean that this belief is correct.

Anxiety can often be linked to our own perception that we suffer from anxiety. And this perception can be difficult to change.

While recognized anxiety treatment methods focus on our thoughts and how they can or should be changed and restructured, I have found that the solution may lie in changing our anxiety beliefs, including our belief that we have anxiety.

Our anxiety beliefs have a significant impact on our mental and physical state. The can induce feelings of illness, complicating the process of achieving anxiety freedom. How can you overcome anxiety when you feel anxious and unwell almost constantly?

Even the most firmly held beliefs can be shaken by new information or knowledge that completely changes your perspective. Many have experienced seeking medical help for symptoms that seemed to indicate serious conditions such as strep throat, only to be told that this was not the case. Often the symptoms disappear shortly after confirmation from the doctor. This raises questions about the complexity of the human psyche and its impact on our health.

The more time you invest in creating a new positive belief, the less time you spend focusing on the anxiety. However, the brain is not easily convinced of the absence of anxiety. Therefore, it takes time to establish new, positive beliefs about your state of health.

No matter what you believe, it is possible to be convinced of the opposite. This simply depends on of the time invested and the efficiency of the technique used. An essential characteristic of beliefs is that they don't have to be objectively true to influence our beliefs. Our own perception creates beliefs and determines their validity.

It is likely that you have beliefs that are not shared by others, and this also applies to me.

Anxiety beliefs.

I have defined two anxiety beliefs below.

Anxiety Conviction #1

- Anxiety is considered a disease.
- You may perceive yourself as sick and think something is wrong.
- You believe you have or experience anxiety.
- The symptoms of anxiety are seen because of an illness.
- Anxiety is considered a disorder

Anxiety Conviction #2

- Anxiety is understood as an emotion and not as a disease.
- You don't consider yourself sick and don't find anything wrong.
- Anxiety is perceived as a feeling and condition rather than something you have or are.
- The symptoms of anxiety are seen as created by your own irrational thoughts about anxiety.
- Anxiety is seen as a temporary challenge with irrational thoughts.

Which beliefs you choose to believe in affects your perception of anxiety. None of them are scientifically proven, although some believe the opposite. Anxiety treatments and diagnoses are based on assumptions, not science.

Now you must choose: Do you want to believe that you have anxiety or not? Your own opinions about having anxiety or not are not relevant here. The choice will influence our further work.

If you believe in belief #1, it can be difficult to become anxiety-free soon. But you can choose belief #2 even if you now believe in #1.

Anxiety beliefs creep into our consciousness like a silent truth created over time. Getting a diagnosis, medication, seeing a psychologist or experiencing anxiety symptoms all contribute to subconsciously convincing you that you are sick.

Many people wonder why they experience so many symptoms, why they need to receive treatment and why the doctor prescribes medication if there is no disease present. This can lead to the conclusion that you must be sick.

Anxiety is not considered a specific disease, although it is treated and referred to as such. There is no diagnosis called an anxiety disease or anxiety disorder. **The diagnosis is called an anxiety condition.** This is because anxiety is an emotion that creates a physiological state in the body.

The discomfort of anxiety combined with the symptoms of anxiety often leads to a belief that something must be wrong because everything feels so uncomfortable.

During periods of irrational anxiety, it is common for individuals to believe that something is seriously wrong. Symptoms can include an accelerated heart rate, difficulty concentrating, choking sensations, difficulty swallowing, tingling and tingling sensations in the limbs, vision problems, dizziness and a feeling of impending fainting. These experiences can lead to fear of losing your mind or dying.

I didn't die and I didn't go insane. But why? I felt it in my body and head and was convinced I was sick. After each anxiety attack, I wondered: How can I not be sick with all the symptoms I feel all the time?

I have had these experiences many times. It happened because I didn't act on the anxiety. I stood still or sat down and let it overwhelm me. If I had acted, the anxiety would quickly disappear.

Let's test it.

Anxiety should make you act here and now. Inaction in irrational anxiety leads to discomfort and misunderstandings. Instead of acting, we start interpreting the symptoms, which leads to panic. Panic occurs because we interpret instead of acting.

The next time you experience anxiety symptoms, act.

What is an action?

Anxiety can lead to certain actions, such as flight or fight. These reactions are familiar.

When I experienced symptoms, I often performed activities such as jumping on the spot, angel jumps, push-ups or sit-ups, or hard physical exercise both at home and outside. These activities help to quickly burn off the adrenaline in the body as they are natural reactions. Therefore, we don't experience rational anxiety in the same way because action is being taken.

The most important thing is to do something physical to prevent thoughts about the symptoms from developing and creating discomfort, which can lead to panic. It is thus logical. The facts show that anxiety does not kill, sicken or drive you insane. The problem arises when we lack appropriate reactions and behaviors to the symptoms and feelings of anxiety.

Once you believe you have anxiety, it feels like the truth.

Therefore, changing this perception can be challenging, but it's not impossible.

Summary: What creates a conviction? The first strong conviction comes from the discomfort of anxiety. Next, it comes from the doctor diagnosing and offering treatment that indicates you have a disease.

Did you know that during an actual anxiety attack, it is difficult to read and write? For example, if you post online about having anxiety, this may indicate that you are not experiencing an anxiety attack at the time. During an anxiety attack, the amygdala is active and blocks our cortex's ability to think clearly.

What you are experiencing in these situations is probably cortisol stress hormone, not adrenaline, and thus not anxiety.

Fact: Exposure therapy is difficult because it goes against our natural desire to avoid discomfort.

Each positive experience creates a new neural connection in the brain. Using distraction techniques, such as shifting focus to "I'm not sick", can instantly reduce anxiety in a specific situation.

Chapter 7: Fear of anxiety (Agoraphobia)

Fear of fear, or anxiety of anxiety, refers to the worry that arises at the thought of experiencing anxiety again. Agoraphobia is defined as an extreme or irrational fear of open or public places. This involves a strong fear of experiencing anxiety symptoms or panic attacks outside the home.

Anxiety can be described as a present fear of experiencing future anxiety symptoms based on past unpleasant experiences.

An accurate definition of fear of anxiety is when the fear of facing the anxiety is more difficult to overcome than the anxiety experience itself. This means that the primary problem is not the anxiety itself, but rather the thoughts of having to go through that anxiety again. These thoughts and the associated emotions inhibit the individual from confronting anxiety in situations where it has been experienced before.

This phenomenon makes it extremely challenging for many to expose themselves to anxiety-relieving situations as part of cognitive behavioral therapy. Only those with strength often manage to overcome this.

The fear of anxiety thus represents a significant barrier. Agoraphobia involves specific fear of situations where escape may be difficult or where help is not immediately available in case of panic symptoms, such as during public transportation, in cars, shops or large open areas.

Anxiety occurs when individuals become worried and anxious about experiencing anxiety again in places where they have had such episodes in the past. This fear can lead to avoiding these places altogether. Even the thought of visiting such places again can cause anxiety symptoms. To avoid anxiety reactions, some people choose to avoid certain places or use alternative options. This causes anxiety about the anxiety to develop into an avoidance behavior that can significantly limit the individual's life and freedom of movement. Over time, this can result in almost total social isolation.

Anxiety about anxiety occurs across all anxiety disorders. Anyone who has experienced an anxiety attack and has misinterpreted the experience is likely to experience fear of the fear afterward. When the amygdala is activated for no apparent reason, the experience is hidden as a potential danger. The amygdala responds to perceived threats and can trigger a fear response even in the absence of a rational threat. Fear of the fear is a major factor contributing to repeated anxiety symptoms.

This fear is why many people seek medical help, possibly taking medication or going to therapy. It can also lead to social withdrawal and avoidance behavior, further exacerbating the anxiety situation. Anxiety thus traps individuals in a vicious cycle of anxiety-related thoughts, symptoms, reactions and behaviors. One's entire life can be affected and controlled by this persistent fear.

Imagine if anxiety symptoms weren't unpleasant. Would you fear them? This is a hypothetical thought.

Summary: Anxiety is a belief that anxiety will recur in places where you have had anxiety symptoms before. These thoughts often start at home and lead to avoidance behavior. As it is a belief, it can be changed.

Anxiety about anxiety creates anticipatory anxiety because we think it will happen again. By thinking about it, we hope it will go away, but we make it worse by expecting it.

Testing beliefs about anxiety

Let us perform a test for your beliefs about anxiety. The purpose is to examine how strong these beliefs can be. Read and repeat the following statements several times:

I am not sick.

There's nothing wrong with me.

I don't have anxiety, I have challenges.

I feel healthy, but I am challenged by irrational anxiety thoughts.

If it's possible for you to say it and mean it completely, it will reduce anxiety over time. If it's not possible to say it out loud, it may indicate that strong beliefs about anxiety are present.

Experience shows that many symptoms can be reduced when you accept that you are not sick. If you are not sick, you can be considered healthy. By repeatedly signaling to the brain that you are healthy, the

beliefs that create negative anxiety symptoms can become less prominent.

Chapter 8: Our thoughts and feelings

Definition of emotion: Emotions are complex psychophysiological experiences that arise through interactions with the environment. **There are four primary survival emotions:** nervousness, fear, anxiety and apprehension. These emotions have different functions: nervousness and fear act as warnings, while anxiety and fearful emotions cause us to react. In addition, there are many other emotions including joy, anger, hate and sadness. Emotions are caused by the release of chemicals in the body, such as dopamine, cortisol and adrenaline. Without these chemicals, we wouldn't be able to experience emotions as they form the basis of emotional responses.

Selective attention and anxiety: Humans are biologically predisposed to selective attention, which can intensify anxiety by focusing on anxiety symptoms while ignoring other stimuli. This gives rise to the uninhibited development of anxiety thoughts.

The impact of thoughts: Thoughts evoke emotions. For example, thoughts of vomiting can cause nervousness, which can escalate into fear and then anxiety. Saying "I'm **anxious** about throwing up" reinforces the feeling that something is wrong. A more accurate description would be "I'm **nervous** about throwing up."

Brain emotion types: The **brain** operates through three primary emotion types: **reason, emotion and instinct**. Reason emotions help regulate emotions such as anger and sadness.

Instinctual emotions like anxiety are automatic reactions and cannot be controlled by rational emotions.

It has been observed that men generally show less emotion due to genetic predispositions, while women are more reactive to their emotions. This may partly explain the higher prevalence of irrational anxiety among women.

Summary: Whatever emotions you experience are due to the release of chemicals in your body. Both mild everyday emotions and intense anxiety symptoms are the result of body chemistry.

Emotions exist solely because of this body chemistry. Therefore, anxiety symptoms do not occur without first being triggered by chemical processes in the body. Symptoms do not occur without an underlying cause, as body chemistry is always released in response to a stimulus.

Our thoughts

Thoughts are abstract and complex chemical processes in the brain. They occur unconsciously and can disappear quickly, making them difficult to remember. Our thoughts are unique because of our different awareness of the world.

Consciousness is not hereditary, which explains the differences between family members. We often work better with people outside the family and choose outside partners to avoid inbreeding.

We have both conscious and unconscious thoughts. Conscious thoughts can help prevent anxiety

thoughts from emerging, but most of our thoughts remain unconscious.

Many of us experience periods where we don't have anxiety-related thoughts because we are deeply engaged in other activities. For example, trying to count from one hundred to zero or moving both little toes simultaneously. This shows that it is difficult to have anxiety thoughts while performing these actions. This proves that we only experience anxiety thoughts when we give them space, which unfortunately happens all too often.

Thought patterns tend to build on top of each other. When you think about one thing, more thoughts about the same topic quickly follow. This is one of the challenges of anxiety. Once you start thinking about anxiety, the thoughts continue in that direction. This rumination accelerates as negative thoughts that provoke fear have a faster cycle than normal thoughts.

Thoughts are abstract.

They don't exist in physical form, but we can still sense them. Even as you read this, thoughts are forming about the content. The brain is constantly evaluating what you are reading to see if it is in line with your beliefs.

This is why you either agree or disagree with what you are reading. If you strongly disagree with what I'm writing, you may want to stop reading. This reaction is perfectly normal. The problem is that you miss the opportunity to learn something new. Reading about something you don't agree with can be challenging. This happens as a process of the brain trying to protect us from what it perceives as "fake news". For example, *I don't have anxiety*. The brain doesn't want to accept this statement because it has a lot of evidence to the contrary. Therefore, *I don't have anxiety* is perceived as "fake news" and is blocked because the brain is convinced otherwise.

We experience thoughts as real and therefore we believe them and react to them. The content of every thought depends on what we are already thinking about and our current emotional state. Are you happy, angry, in love, negative, etc. Thoughts are context dependent.

There are several types of thoughts. Thoughts that we consciously create (rational thoughts) and unconscious thoughts, which make up about 60% of all our thoughts. We create around 60,000 thoughts daily, which equates to about one thought per second during our waking hours.

Thoughts are formed from memory, emotions, imagination, reactions and past thoughts. The way we have thought in past situations affects how we think in the future until the problem is solved.

Thoughts can be divided into rational, emotional and instinctive thoughts.

When experiencing anxiety or fear, more anxiety-related thoughts arise, which in turn can cause more anxiety feelings. This can create a spiral. Being able to control or stop negative thoughts can help reduce anxiety, decrease depression or ease stress. However, this takes practice.

Thoughts and Feelings

Your thoughts create your emotions, resulting in a state that triggers a reaction. When you think about your partner or your children, you experience joy. If you think about someone you've lost, you feel sadness. If you think about someone who has annoyed you, you feel anger. These emotions can be controlled.

When you think about anxiety, it creates fear, which automatically triggers a reaction. Fear cannot be controlled once it is felt. You can't think your way out of fear. If you are afraid, you are afraid.

It's impossible to hold just one thought for a long time. Thoughts are also very situational. If you're going on vacation, you think about it a lot. If you have a new girlfriend, you think about it a lot. If you're angry with someone, you think about it a lot.

When you think about anxiety, more and more thoughts come to mind. Small short thoughts turn into a prolonged stream of thoughts because of all the thoughts that suddenly appear.

Each new anxiety thought is thus a continuation of the previous one.

The act of thinking

When experiencing anxiety symptoms, it can be due to past experiences manifesting in the present. These memories have the potential to affect the future and can come up repeatedly. For example, a negative experience at work can cause negative thoughts to arise every morning, which can negatively affect your day. This can lead to stress and later anxiety about going to work. All situations have the potential to be affected by anxiety, as our emotions are controlled by a desire/resentment mechanism. Thus, past experiences can create an unpleasant feeling at the thought of going to work in the present, which can be physically felt in the body.

Thoughts start as unconscious and can subsequently become conscious. At first, you may not realize that you are thinking about anxiety, but gradually the conscious thoughts take over and symptoms can start to be felt.

Over time and using different methods, you may experience fewer anxiety thoughts because there are no longer so many unconscious thoughts about anxiety. **If you don't think about anxiety, you don't create unconscious thoughts about it.**

What is a thought

Notice how often your thoughts appear and disappear, especially before you fall asleep. This is when the brain processes the day's experiences and decides which ones to store in memory. This process happens while you sleep.

When we reflect on the future, we use our memories from the past as a reference. Thoughts consist of mental images, smells and sounds of things that are not physically present, yet can be visualized and felt. If the thoughts become too intense, the cerebrum helps sort them out and assess their validity, which is a function of our rational brain. This ability enables us to control our actions and emotions.

If everyone acted impulsively on thoughts of revenge, it would have serious consequences, such as dangerous situations in traffic. Traffic poses a real danger that the brain does not always fully understand as it is not optimized to handle speed concepts.

In ancient times, high speed didn't exist, which means we don't have an encoded fear of it and therefore don't instinctively understand the risk of death resulting from it. We only develop this understanding rationally when we are around 20-25 years old. This explains why so many young people are involved in car accidents, they lack an adequate assessment of the dangers of high speed.

The same goes for soldiers. It is far easier to recruit an 18-year-old to participate in war than a 35-year-old because of the inability to assess the consequences of danger.

Negative thoughts

Experiencing negative thoughts is a normal part of the human experience. As mentioned earlier, the brain thinks negatively as a protective mechanism. Imagine if the brain only registered positive thoughts, many

danger signals would be missed.

Take falling in love as an example. In this situation, you're overly positive and only see the best aspects without noticing the flaws. Often you only become aware of the negative aspects when it's too late because your view was too positive. Therefore, negative memories are stored in memory, they act as a mechanism to protect us from repeating past mistakes.

Unconscious anxiety thoughts

The reason we experience anxiety thoughts is because we originally created unconscious thoughts about the anxiety. Had we been able to ignore the anxiety from the beginning, we would never have formed these unconscious thoughts. Therefore, we wouldn't have had conscious thoughts about the fear either.

Chapter 9: Avoidance behavior: The road to prison

When I say "prison," I mean isolation at home due to anxiety. Anxiety creates avoidance behavior. One of the worst things about Irrational Anxiety is the build-up of these behaviors. I lived with it for many years without realizing it. Anxiety and avoidance behavior are linked - you can't have one without the other.

Why do we build avoidance behavior? The body wants to protect us. When we experience anxiety somewhere we go, the brain stores it as dangerous and warns us. This can happen anywhere. For example, if you've experienced symptoms in a crowd or a department store, you'll start avoiding those places because of the discomfort.

The problem is that when we engage in avoidance behavior, we confirm to the brain that these places are dangerous. Eventually, we avoid almost everything. I lived like that for almost 40 years until I stayed home all the time. Avoidance behavior is very problematic and difficult to avoid when living with Irrational Anxiety.

Staying in the grip of anxiety

Holding on to anxiety is an overlooked consequence of our anxiety behavior. Letting go of the belief that anxiety is a disease is important for your quality of life. Many people believe that anxiety must be a disorder because of its unpleasant nature.

The first retention often happens when the doctor prescribes medication instead of informing about the anxiety condition. This leads to fear of forgetting the medication, which creates a medication prison.

Retention is due to a lack of understanding of what is happening to us. Remember, it's a condition, not a disease. Only you can remove this attachment. Psychological attachment can only be stopped with rational thought.

Retention is rarely mentioned by professionals, but it is an important part of the anxiety problem.

Consider this: How often do you choose to stay home to avoid triggering your symptoms? How quickly do you turn around if you realize you forgot to take your medication?

Chapter 10: Anxiety - the forbidden word

There is hardly a more negative word than anxiety. That's why it can be challenging to maintain a positive attitude when experiencing anxiety. The word anxiety itself evokes negative associations. This negativity is created by us by associating anxiety with various unrelated problems.

A major mistake occurs when we refer to irrational anxiety as anxiety. Anxiety should signal that it is rational anxiety. Unfortunately, this is no longer the case. A major reason why we experience anxiety repeatedly is the way we refer to anxiety and ourselves. It is therefore crucial that we always speak positively to ourselves and avoid using negative words and phrases, as this will unconsciously reinforce anxiety.

It is unnecessary to plan for future anxiety by using the word anxiety. If it is necessary to use sentences with the word anxiety, it can be phrased like this:

"The irrational anxiety I'm experiencing right now" (which only applies in this moment). "The irrational anxiety I am currently experiencing" (during this specific period).

Avoid using statements like "I am anxious" or "I have anxiety" without a time frame.

There is a significant difference between saying "I have anxiety" and "I'm experiencing irrational anxiety right now" or "I'm anxious" and "I'm experiencing irrational anxiety at the moment".

By including terms like "right now" or "at the moment", you limit anxiety to a temporary experience, rather than a permanent state.

IMPORTANT: You neither are nor have anxiety. You feel anxiety. You experience anxiety. You sense anxiety. You sense anxiety. You feel anxiety.

In general, avoid talking about anxiety except when it's necessary, such as at the doctor's office, as talking and thinking about it brings anxiety to life. Imagine you never thought or talked about your anxiety.

I hope you can see the problem with the phrases "I have anxiety" and "I am anxious" if you want to be anxiety-free. It would be best if you could avoid using the word anxiety altogether. Use the word **challenges** instead.

I don't have anxiety.

You might think that the phrase "I don't have anxiety" could be used for positive belief. But at first, it's hard to believe in the phrase "I don't have anxiety".

No matter how many times you say, "I don't have anxiety", it can be hard to be convinced because your body and thoughts often tell you otherwise. Thoughts can indicate that you have anxiety and repeating such phrases can reinforce this perception.

If you say, "I don't have anxiety", the subconscious mind will immediately doubt it. The brain will try to disprove it. The doubt alone can convince you that it's not true and that you have anxiety. This happens because all previous experiences of anxiety quickly pop up in the conscious mind and disprove the statement. You now think more about anxiety because you thought or said the phrase "I don't have anxiety".

The brain does not understand the word "not" in this context. The sentence "I don't have anxiety" is a statement that the brain cannot confirm or deny. It may be more effective to use: "What is anxiety?", "Why do I have anxiety?" or "When will anxiety go away?" The brain responds better to questions as it makes it think and try to find a solution. However, the brain doesn't know the word anxiety because it's a concept. The brain doesn't know that we call one of our emotion's anxieties. Only our conscious mind knows that.

The brain perceives anxiety as an emotion, even though it is an autonomic response from the reptilian brain. The cerebrum and the reptilian brain do not communicate directly with each other. The cerebrum only becomes aware of anxiety when it is reacted to. It wonders about the origin of this feeling but receives no answers as it is an instinctive reaction. Therefore, the brain is unable to define anxiety or provide a rational explanation for it. The brain can only answer questions based on learned information, such as "What time is it?", "What is 5 + 5?" and "Who is Thomas?".

If you want to talk about anxiety, you can use the following phrases:

"I am challenged by my thoughts."

"I have challenges with my thoughts as they create unpleasant feelings."

It can be helpful to consider how the word anxiety is used in the future. Anxiety can be easier to manage when it is seen as a challenge rather than something you are or have.

Conclusion

Avoid using the word anxiety as it is perceived negatively. It can bring back memories of previous experiences with anxiety, which can lead to repetitive symptoms. How you talk about, and label anxiety can have a big impact on your mental state and experience of anxiety. By using more neutral language, you can reduce the negative effects on self-image. This change in perspective can be an important step towards managing anxiety better.

The role of Amygdala

The amygdala is a part of the brain that does not relate to psychology, psychiatry, medicine or therapy. It is found in the evolutionarily older part of the brain and is older than the rational cerebrum.

The amygdala only reacts based on its own signals and has no understanding of thoughts. It senses danger through one's actions, reactions and behavior in relation to the environment. The amygdala constantly monitors our surroundings for potential threats.

We cannot change our immediate reaction to anxiety. Anxiety triggers an automatic fear response to motivate us to act. When we experience anxiety, it triggers a consistent response: we experience fear and expect negative outcomes, which we are biologically programmed to do.

Anxiety arises from the fear that something might happen in the future.

Fear and anxiety are emotions that help with survival. Because they are designed to promote survival, they are experienced as unpleasant. This discomfort instinctively causes us to react, resulting in a flight or fight response. When you don't react with a flight or fight response, the discomfort feels even worse. In irrational anxiety, this reaction is absent because there is no real danger. This can confuse the body, which then becomes even more anxious because it doesn't understand why we don't react to the fear as expected.

Anxiety can be so unpleasant that you automatically want to avoid it. **You may become more afraid of**

your own anxiety than of the actual danger that triggered it. This leads to panic over the feeling of anxiety rather than the actual danger. This is a natural mechanism to help you survive an encounter with a lion, for example.

Chapter 11: At the doctor

Professionals will always look for signs of illness in anxiety because that's what they are trained to do. Patients, on the other hand, look for explanations.

"Why did I experience anxiety the first time, why do I subsequently have anxiety, why do I feel sick, why is it so uncomfortable, why am I afraid to experience it again." Etc.

These are the patient questions that should form the basis of treatment. Not whether anxiety is genetic, a disorder, chemical imbalance, etc. It doesn't matter, as it will always be the discomfort that is the problem and not the cause.

Will it change your situation, here and now, to be prescribed medication that might work in 8 weeks? Or will it change your situation here and now to be reassured by concrete anxiety information?

Prescribing medication that may work in 6-8 weeks is not effective when patients need immediate help at the first visit to the doctor with anxiety symptoms.

A normal consultation with the doctor can typically go something like this.

You come to the doctor with your anxiety symptoms.

After a thorough examination and discussion of your symptoms and an anxiety test, you will be given an anxiety diagnosis and possibly prescribed medication or offered other treatment.

A hypothetical wish consultation could look like this.

Imagine you go to the doctor. The doctor examines you thoroughly and you fill out an anxiety test. Afterwards, the doctor says, "Yes, there is no doubt, you have been experiencing irrational anxiety symptoms. However, it's nothing to worry about as it's our own body chemistry you labeled as uncomfortable. The uncomfortable feeling is what we call anxiety. We can therefore rule out that you are sick, but simply experiencing natural, but yes, unpleasant anxiety chemistry. The anxiety chemistry is called adrenaline and is very unpleasant to experience when there is no cause for its release in the body.

The problem is that the unpleasant anxiety experience is stored in your memory precisely because it was unpleasant. It's that discomfort that has you sitting here with me now. But there's nothing to be nervous about. It's not dangerous at all, just uncomfortable. The stored memory of the anxiety experience is what makes you subconsciously think about it so much because you want to avoid more of the discomfort. Now it's important that we stop your anxiety thoughts before they become a problem for you.

Let's see if we can do something about your anxiety memory so that it disappears again, just as it would if it had been more rational anxiety. Remember, it was only stored because you reacted inappropriately to the anxiety state created by the adrenaline and other drugs. It was perceived by the brain as a negative

reaction that it is coded to store to learn from.

I hope I've put your mind at ease. Good. Uh...

First, you need to become aware that you are not sick or doing something else wrong. The anxiety memory must not be allowed to take over your thoughts. Therefore, you must now focus on the positive, e.g. that you are not sick as you may have thought before you came here. Therefore, it is important to tell yourself that you are not sick. Try saying the following after me sometimes, *I'm not sick, I'm not sick*. It's okay to say this because you're not sick, you're just challenged by the discomfort of anxiety.

How did it feel? Was it difficult? Yes, it can be difficult at first to believe that you're not sick. But you have my word that you are not sick, but challenged by the anxiety, just like everyone else who experiences anxiety symptoms. We all react the same way to anxiety. With fear of it happening again.

We're up against strong emotions, so it takes a bit of convincing before the anxiety thoughts completely leave you. But it will come.

When you get home, try making some posters with the text, *I'm not sick*, and hang them up in visible places in your home. I guarantee you'll think a lot less about your anxiety in the future.

Do you know why? Because every time you see the posters, you push the anxiety thoughts to the background and tell yourself you're not sick. You don't give them space when you focus on something else. And that's the most important thing. For the future, you only need to have one thought in your head, *I'm not sick*. If you can do that, you'll find that the anxiety disappears in a short time because you came here so early in the process.

If you are unsure if what I have told you will work, I will prescribe medication for a limited period as you have probably heard is normal and had hoped for, so you can feel more comfortable. Just be aware that the medication can take up to 2 months to show an effect. However, medication is never guaranteed to show an effect. At the same time, there is also the question of side effects and how many you are willing to accept. Therefore, I think you should use the 2 months to convince yourself that you are not sick, as I have explained here. I would recommend that you make the posters and hang them up at home where you can see them all the time and introduce verbal use of the phrase, *I am not sick* into your everyday life. Over a short period of time, your anxiety thoughts will disappear from your consciousness if you follow these simple tips.

If the posters and the sentence have no effect after the 2 months, you simply continue with the medication until we make an appointment. I hope that the medication influences you at the latest after the 2 months.

Call me once a week so I can follow up on how you're doing. If you need to, we can talk more about anxiety and its challenges. You can book another appointment on your way out.

Before you go, I have this new information anxiety brochure that contains all the knowledge you need, which I've explained a bit about here. It will help you a lot if you read it a few times."

This text was of course meant hypothetically, as such a consultation will probably never happen. to take place.

Fact: Irrational anxiety only becomes a problem because we don't act on the released chemistry as we would naturally do with rational anxiety. When exposed to anxiety, the body releases stress hormones that create an urgent need for action. In **rational anxiety**, we act instinctively - we flee, fight or do something concrete to meet the perceived danger. This burns off the excess energy and restores calm to

the body. In **irrational anxiety**, on the other hand, there is no external threat to act on and the body panics over this "paralysis". The accumulated chemistry is misinterpreted as symptoms of illness or body malfunction, which intensifies the discomfort.

The truth is that the physical reaction of anxiety requires only one thing: action to burn off the chemistry. It's not necessary to understand complex theories about genetics, trauma or brain chemistry to break free from anxiety. All that is required is to act on the bodily reaction instead of trying to analyze or interpret it.

Of course, it's best to avoid triggering anxiety altogether.

If you don't agree with this fact, please write to me and explain why not.

Chapter 12: Medicine and Medical Treatment

Anxiety is considered a disease, but the feeling of illness is often caused by a misinterpretation of the adrenaline feelings, or symptoms. Thus, it is the misinterpretation or reaction that develops into an illness. However, this reaction can be seen as a rational response to irrational symptoms, as the symptoms create a discomfort that we naturally seek to avoid.

It was the pharmaceutical industry and their psychiatrists who defined anxiety diagnoses as diseases and disorders, leading to their inclusion in DSM III. This allowed psychiatrists to prescribe psychotropic drugs to treat all anxiety diagnoses. Without the diagnosis, this practice would not have been legal.

In 1988, the first SSRI medication, Prozac, was introduced and took over the anxiety diagnosis market. Since then, hundreds of other drugs have been developed.

Patients are generally the most qualified to assess whether a drug has the desired effect. The fact that the pharmaceutical industry claims that a drug works is of limited value as the test data is not publicly available. Doctors also do not have access to this data and therefore never know with certainty whether a prescribed drug will be effective for an individual patient. Therefore, patients should be critical and ask their doctor how, when and why they can expect to feel an effect from the treatment. It is important to make sure that the doctor knows the answers to these questions for the prescribed drug.

Three factors can make a patient feel better after treatment: the drug effect, the placebo effect and the natural course of the disease. We call this spontaneous remission.

Patients taking anxiety medication do not learn to manage their anxiety on their own. Medication can make you feel better, but you know that the problem is not solved. Anxiety memories are stored in the memory and medication, or thoughts cannot remove them. Therefore, the anxiety continues.

I was on medication for 12 years, from SSRIs to benzos, with no effect and many side effects. The anxiety continued unchanged until I decided to take control and stop the medication. After 12 years of ineffective treatment, I realized that another 10 years would hardly make a difference.

The power of fear

The first step to overcoming anxiety is to have the will to do so. You shouldn't just accept anxiety as a permanent condition, as some professionals believe. Why should you? You had a life before anxiety, so of course you can live that life again. However, it requires effort on your part.

Just as you developed the anxiety yourself through misinterpretation, you now must reinterpret it yourself to overcome it. This is an achievable task, although it takes time.

The solution lies within you, and it is crucial that you have the will to change the situation. I emphasize this because I often see people who think they must live with anxiety forever. But this is not the case. Anxiety is always a temporary condition, although this condition can reappear repeatedly.

What you may be living with is the fear of anxiety attacks, not the anxiety itself. These two things are different from each other.

Alternative diagnoses

Diagnoses should be defined by the degree of discomfort rather than the number of symptoms. That is, how much the anxiety affects the individual, rather than how many symptoms are experienced. The symptom approach is a legacy of a time when anxiety was considered a condition that required medical treatment. Today, we have a deeper understanding.

It's always the discomfort that needs to be treated, not the symptoms. Symptoms may disappear over time, but the fear of recurring anxiety persists as long as there are memories of previous anxiety experiences.

The challenge was to develop a method to break this cycle, which we succeeded in 2018 with the method described in the last part of the book.

Cognitive behavioral therapy (CBT) was developed in the 1960s when there were fewer diagnoses. Therefore, these therapies are less relevant to modern anxiety treatment. Online CBT and Metacognitive Therapy (MCT) could be alternatives, but the theory behind them still seems outdated. New methods are needed to effectively address the approximately 350 million diagnoses worldwide.

Chapter 13: SSRI Medication and Traditional Therapies

SSRIs prolong the action of serotonin by inhibiting its reuptake into the synaptic cleft. This causes serotonin that has already been released to remain active longer and stimulate the receptors more intensively.

To adapt to the prolonged stimulation of serotonin receptors, the brain adjusts the number of serotonin receptors or their sensitivity. This adaptation is called **downregulation**.

When treatment ends, the brain returns to its natural processes. This transition can lead to temporary

imbalances and symptoms as the brain needs to restore receptor sensitivity and normalize serotonin production and activity after SSRI use.

After 12 years of taking various SSRIs, which had limited effect on me, I have gained some experience. It is well known that I am not a fan of SSRI medication as it had negative consequences for me. I share this experience with many others.

The theory behind SSRIs is that they help reduce negative thought patterns as serotonin has a mood-lifting effect. Online you can find statements like: If the root cause of a person's anxiety is not related to serotonin issues, these medications may not be effective. Since most people's serotonin levels are not the primary cause of anxiety, a change in serotonin management will not improve their condition.

This may explain why anxiety is not necessarily related to serotonin. Serotonin simply tries to limit our thoughts about anxiety by lifting our mood, without addressing the anxiety problem itself.

Medication doesn't change your perception of the anxiety, you will still fear experiencing it again.

Serotonin is a neurotransmitter, a chemical that regulates mood, among other things. Serotonin is often associated with feelings of well-being and happiness. It is believed that serotonin helps to stabilize mood, thereby reducing anxiety and promoting a sense of calm and contentment. The theory is that prolonging the effects of serotonin can improve mood. However, there is no definitive evidence for this effect, and it is based on assumptions.

For some people there are improvements, but these are often insufficient to eliminate anxiety thoughts. This is because there are other factors at play than just the anxiety thoughts - namely the discomfort caused by the anxiety. This is why the phrase 'it works for some, but not for all' is often used.

If antidepressants worked the same way, they would work for everyone because our brain chemistry is the same. Just like painkillers and benzodiazepines work for everyone regardless of brain chemistry. This indicates that the active ingredients in antidepressants may not be sufficiently effective. The focus may be on the wrong mechanism when addressing serotonin levels, which may explain the limited effect for many patients.

The word evidence is used when you want to document SSRI efficacy instead of scientific evidence, as scientific efficacy cannot be proven unequivocally. When searching for SSRI efficacy, you will find both evidence for and against the effectiveness of SSRIs. Placebo is often mentioned in connection with SSRI efficacy.

Placebo effect: Several studies show that the placebo effect is significant with antidepressants. Means. Patients experience improvement based on the expectation of recovery.

In addition, online anxiety forums can provide insight into the perceived effects of SSRI medications for anxiety.

There is no such thing as a brain imbalance, it's a myth created by the pharmaceutical industry to increase drug sales for depression. Anxiety medication does not address the cause of anxiety but only tries to limit the thinking process about it. SSRIs do not increase the amount of serotonin but merely prolong its activity by preventing reuptake into nerve cells.

Why don't we add serotonin to the brain?

The blood-brain barrier (BBB) is a selective permeability barrier that protects the brain from potentially harmful substances in the bloodstream. Serotonin cannot cross the BBB effectively, so oral or other administration of serotonin would not increase its levels in the brain.

Serotonin also plays a role in various bodily functions outside the brain, including regulation of the gastrointestinal system, blood clotting and cardiovascular function. Adding serotonin systemically (through the bloodstream) can therefore lead to unintended side effects in these systems.

The effect achieved by SSRI medications, if any, is often not proportional to the side effects experienced. The number of side effects is significant for a drug that has limited effect.

Active placebo is no longer used as it shows the limitations of SSRI medication. SSRI medications primarily have side effects and limited efficacy for some users. If 1000 people take SSRIs, only around 200 will experience some effect ([see Appendix 1](#)) while a placebo could have similar results with fewer side effects. This raises the question of whether the emotions being treated are natural.

What is the placebo effect of taking SSRI medication?

The overall effect of SSRIs shows:

With and without inactive placebo effect:

Overall improvement (with placebo effect): 50-60% Pharmacological improvement (without placebo effect): 20-30%

This indicates that pharmacological effects of SSRI medications affect 20-30% of users. Overall, 50- 60% achieve improvement when the placebo effect is included.

Studies have shown that SSRI medications influence 20-30% of users, mainly due to the placebo effect. When using active placebo, the effect is reduced to only 5%. Due to this discrepancy, active placebo was removed from the tests, which could indicate a lower effectiveness of SSRI medications. When inactive placebo is used, an effect of 20% appears, presenting the medication in a more favorable light.

It is well known that the pharmaceutical industry can tend to present tests in a way that emphasizes positive results, as they often perform these tests themselves. Public tests have become rarer, which can be worrying.

In addition, three SSRIs (fluoxetine, paroxetine and sertraline) have been reported to be among the 30 most addictive drugs according to existing data.

SSRI drugs affect the balance of serotonin in the brain. Some argue that there is no scientific evidence of serotonin deficiency in the brain and that this claim is developed by the pharmaceutical industry. There are also views that SSRIs do not correct a chemical imbalance, but rather may contribute to it, possibly making it difficult to discontinue the medication.

There is evidence to support these views, although they are not necessarily widely recognized in the pharmaceutical industry.

The author has found that living with irrational anxiety without medication for 26 years was better compared to the 12 years I was on medication. This raises the question of why some may experience suffering on SSRI medication while others benefit from it.

What should they do if they don't experience any effect from medication? Where can they find help?

Chapter 14: Cognitive treatments

Intro to cognitive therapies.

Cognitive therapies and medication are currently used primarily because there are no better alternatives. Statistics show that these methods only have a proven effect for around 20% of those treated (see [Appendix 1](#)). That must leave around 80% without the desired effect. If the evidence shows that the treatment works for 20%, we must also recognize that it does not work for the remaining 80%.

Perhaps we should focus more attention on this large group who are not seeing an improvement. What happens to them? Many of them are left without solutions and often end up dependent on various medications that also only show an effect for between 12 and 20% of patients. (see [Appendix 1](#)) This raises an important question: What can we do to better help the 80% who are currently not getting the help they need?

By shifting our attention to this group as well, we can potentially develop new and more effective therapies to fill the gap that current methods do not cover. It's not enough to focus on those who benefit from treatments - we must also take responsibility for those who do not, as they make up the largest group.

To do that, you also must look at our assumptions about anxiety. Is it correct with such a low effect of treatments? Is something misunderstood, misinterpreted or overlooked in the accepted understanding of anxiety?

The biggest problem, of course, is that too many patients' self-pay professionals for treatment that does not have the desired effect, which, unfortunately, I have experienced several times in my many years with anxiety symptoms.

This book is an attempt to uncover these challenges and show an alternative and non-medical understanding of anxiety.

Cognitive Behavioral Therapy (CBT)

Cognitive Behavioral Therapy (CBT) is one of the most widely used and well-researched methods for treating anxiety. It focuses on the connection between thoughts, feelings and behavior and offers practical tools to change negative patterns.

Basic principles of CBT

CBT is based on the idea that our thoughts have a strong influence on our emotions and behavior. When we experience anxiety, it is often due to negative or distorted thoughts about ourselves, the world or the future. The therapy helps identify and challenge these thoughts to create more constructive and realistic ways of thinking.

How does KAT work?

CAT typically consists of the following steps:

Identification of thought patterns: The client learns to recognize the thoughts that trigger anxiety.

Challenging negative thoughts: The therapy works to question the validity of thoughts and find alternative perspectives.

Behavioral changes: The client is introduced to new ways of acting and reacting that reduce anxiety and avoidance.

Exposure: Through gradual exposure to anxiety-provoking situations, clients learn to break avoidance patterns and build confidence in their ability to manage anxiety.

Benefits of CBT

CBT is evidence-based and has proven effective in treating a wide range of anxiety disorders. The therapy provides concrete tools that can be applied in everyday life and helps the client take control of their reactions to anxiety.

Limitations of CAT

While CBT is effective for many, it can be challenging for individuals who have difficulty working with their thoughts or engaging in exposure exercises. It also doesn't always address the deeper memory aspects of anxiety, which may require a more targeted approach.

Integration with other methods

CBT can be combined with our method, which works with the underlying memories and beliefs that maintain anxiety. Combining the two approaches can create a more holistic treatment plan.

Practical applications

Many of the techniques used in CBT can be applied outside of the therapy room. For example, challenging negative thoughts and practicing gradual exposure can be useful tools in your own process towards overcoming anxiety.

Conclusion

Cognitive Behavioral Therapy is a proven method that helps break the cycle of anxiety by changing thought patterns and behavior. When combined with other methods, CBT can contribute to a more comprehensive and effective treatment of anxiety.

Chapter 15: Metacognitive therapy (MCT)

Metacognitive therapy (MCT) is a modern approach to anxiety treatment that focuses on how we think, rather than what we think. It helps reduce persistent worry and overthinking, which are often at the heart of the anxiety cycle.

What is metacognition?

Metacognition refers to our awareness of and control over our own thought processes. MCT is based on the idea that it's not the thoughts themselves that create anxiety, but rather the way we react to them. For example, a random worry can escalate into persistent anxiety if we spend a lot of time analyzing and

worrying about it.

How does MCT work?

MCT works to change our relationship with thoughts. Instead of trying to control or change the thoughts themselves, we learn to see them as temporary and harmless. The therapy helps break the habit of overthinking by focusing on strategies such as:

Separation from thoughts: Understanding that thoughts are not necessarily true or relevant. Reducing thought processes: Learning to interrupt unnecessary worries and ruminations.

Increasing attention control: shifting focus from anxiety symptoms and worries to more constructive activities.

Benefits of MCT

MCT is an effective method for reducing excessive worry and rumination. It is especially useful for people who feel trapped in a spiral of negative thoughts. The therapy is relatively short-term and focuses on concrete strategies that can be implemented quickly.

Limitations of MCTs

While MCT is useful for many, it works primarily with thought processes and does not directly address the deeper memory aspects of anxiety that our method targets. For people with persistent anxiety, it may be necessary to combine MCT with other approaches.

Coherence with other methods

MCT can be used in conjunction with our method, which works with the underlying memories and beliefs that drive anxiety. While MCT focuses on reducing overthinking, our method can help break the link between memories and anxiety symptoms.

Conclusion

Metacognitive therapy is an approach to reducing the overthinking and worrying that often perpetuates anxiety. By combining MCT with other methods, you can get a more holistic solution that not only reduces symptoms but also addresses the deeper causes of anxiety.

Chapter 16: Exposure therapy

Exposure therapy is an evidence-based treatment method that focuses on gradually confronting the situations that trigger anxiety. It helps break avoidance patterns and build tolerance to anxiety by learning that it is not dangerous.

What is exposure therapy?

Exposure therapy involves systematically exposing yourself to the situations, places or thoughts that cause anxiety without avoiding or running away from them. Through repeated exposure, the brain learns that the anxiety will subside on its own and that the situations do not pose a real threat.

How does it work?

Exposure therapy works by altering the brain's response to anxiety-inducing stimuli. When we avoid a situation, we reinforce our belief that it is dangerous. Exposure breaks this cycle by showing the brain that the fear response is unnecessary and temporary.

Types of exposure

Graduated exposure: Start with less anxiety-inducing situations and gradually work your way up to more challenging scenarios.

Flooding: Expose yourself directly to an intense anxiety-inducing situation to quickly break down the fear. This often requires support from a therapist.

Interoceptive exposure: Focus on the body's reactions to anxiety, such as palpitations or dizziness, to reduce the fear of these symptoms.

Benefits of exposure therapy

Exposure therapy is an effective method for reducing anxiety in the long term. It teaches you to manage and tolerate anxiety instead of avoiding it. Many people experience a significant reduction in their anxiety symptoms after repeated exposure.

Limitations and challenges

Exposure therapy can feel daunting, especially at first, as it requires confronting your feared situations. It's important to take the process at a pace that feels manageable and to have support if needed. Therapy works primarily with behavior and doesn't always address the underlying memories and beliefs that maintain the fear.

Integration with other methods

Exposure therapy can be combined with other methods such as Cognitive Behavioral Therapy (CBT) or our method to create a more comprehensive treatment. While exposure focuses on the behavior, our method can help address the underlying memory patterns.

Practical advice for exposure

Create an anxiety hierarchy list: Identify situations that cause anxiety and rank them from least to Scariest.

Take small steps: Start with the least anxiety-provoking situation and gradually work your way up. Repeat the exposure: the more often you confront the situations, the more the anxiety will subside.

Be patient: Exposure is a process that takes time, but the results are long-lasting.

Conclusion

Exposure therapy is an effective method to break avoidance patterns and reduce anxiety. By systematically confronting feared situations, you learn that anxiety doesn't have to control your life. When combined with other approaches such as CBT, you can create a holistic approach to overcoming anxiety.

In summary, while CBT and MCT primarily focus on cognitive and behavioral aspects of anxiety, they both acknowledge the influence of genetic, neuro-biological and social factors. These factors can create a predisposition to anxiety, but the therapies focus on modifying the individual's thought processes and behaviors to manage and reduce anxiety symptoms.

However, neither Cognitive Behavioral Therapy (CBT) nor Metacognitive Therapy (MCT) is designed to deal with the 350-400 million anxiety diagnoses worldwide. Unfortunately, the help they offer is a drop in the ocean. Tackling anxiety globally requires completely different methods.

CBT is complex and was developed in a period when the understanding of irrational anxiety was relatively new and diagnoses were far fewer, in the 1660s. This was before our modern and technological society really took off in 2000. At the same time, new knowledge about anxiety has led to even more diagnoses without the corresponding development of new and better treatment methods. It's important to remember that medicine only treats symptoms when it works, and that MCT builds on CBT.

For cognitive behavioral therapy (CBT) to make a significant difference, 10-20 million practitioners need to be trained globally. Furthermore, the method must be made freely available. However, this scenario is unlikely. Therefore, other solutions should be considered that do not involve expensive individual treatments over long periods of time. Our method represents a proposal for such a solution, but others are likely to exist as well.

Please note that if CBT or metacognitive therapy (MCT) does not prove effective, it is not necessarily your fault. This may be because the methods were developed in a time with a different understanding of the causes of anxiety.

Anxiety and its consequences

Anxiety can be a very intense condition, mainly because it often leads to a self-perpetuating spiral of further anxiety.

Consider how anxiety would be experienced if it wasn't associated with discomfort. Would you see a doctor, take medication or go to therapy if you felt no discomfort from anxiety? Probably not. This hypothetical scenario illustrates that anxiety is only considered a problem because it causes discomfort, which is what we respond to and want to avoid. What can we do if we can't eliminate the discomfort of anxiety itself?

Experience shows that the most effective approach is not about suppressing symptoms and thoughts, but rather about processing the unpleasant memories that anxiety has left in our minds.

Why do we remember irrational anxiety so clearly, while we often forget rational anxiety? The problem lies not in the anxiety itself, but in the memory of it. Therefore, if it is not possible to eliminate the discomfort of anxiety, the focus should be on erasing the memories of this discomfort.

It is irrelevant what diagnosis the person receives or what trigger started the anxiety. Whether you suffer from social anxiety, health anxiety, generalized anxiety or panic disorder, the fear of recurring anxiety is linked to previously experienced discomfort and not the diagnosis itself.

When patients with anxiety are told that they can only reduce their symptoms, the implication is that they can never be completely anxiety-free. This can further entrench them in their condition. At the same time, this is not true.

To help people overcome anxiety, attention should be paid to erasing or changing the memories of anxiety discomfort. This will help to break the vicious cycle of repeated anxiety experiences.

The day we start addressing the discomfort that comes with anxiety after the initial experience of anxiety, instead of just focusing on symptoms and thoughts, we will see a significant change in patients' treatment pathways. This could potentially shorten the treatment period from years to months or even weeks for some patients.

Strengths and weaknesses of existing methods

Cognitive Behavioral Therapy (CBT):

- **Strengths:** CBT has proven effective in changing thought patterns and reducing anxiety in many cases. Its structured approach allows patients to identify and challenge their negative thoughts.
- **Weakness:** The method requires a high level of motivation and commitment from the patient, which can be a barrier for those with severe anxiety or low energy. In addition, CBT does not always focus directly on the underlying emotional memories.

Medical treatment (SSRIs):

- **Strength:** SSRI medications have proven efficacy for some patients by stabilizing mood and reducing anxiety levels over time. The medication is readily available and can be a quick fix for acute symptoms.
- **Weakness:** Effectiveness is limited to a small proportion of users and side effects such as fatigue, weight changes and numbness can worsen quality of life. In addition, the medication does not address the psychological causes of anxiety.

Exposure therapy:

- **Power:** Exposure therapy effectively helps break avoidance behaviors that maintain anxiety. Many patients experience significant improvements in their ability to cope with anxiety-provoking situations.
- **Weakness:** The therapy can be very anxiety provoking for patients and requires careful support and guidance. If not done gradually and correctly, it can lead to a worsening of symptoms.

Metacognitive therapy (MCT):

- **Strengths:** MCT focuses on reducing overthinking and worrying, which can produce quick results. The therapy is relatively short-term and convenient for patients who feel trapped in thought spirals.
- **Weakness:** The method does not directly address past trauma or emotional causes of anxiety, which can be a limitation for some patients with complex anxiety issues.

Part 3: Memory and the Anxiety Cycle

Chapter 17: Memory. The path to freedom.

Normal Function of Memory

Memory is one of the brain's most important functions and plays a crucial role in our daily lives. It helps us to:

- **Learning new things:** Memory stores information we learn so we can use it later.
- **Remembering experiences:** Memories of past events allow us to learn from our experiences.
- **Navigating the world:** Memory helps us recognize faces, places and situations so we feel safe and know how to react.

Normally, memory acts as an auxiliary mechanism that allows us to draw on past experiences and adapt our behavior accordingly.

Memory Function in Anxiety

In anxiety, memory behaves differently. Instead of helping us adapt, it reinforces anxiety through a vicious cycle of negative thoughts and reactions:

Storing Discomfort: When we first experience anxiety, the experience is stored as a negative and unpleasant memory.

Automatic Activation: Every time we are faced with a situation that reminds us of the first anxiety experience, the memory is automatically activated and reminds us of the previous discomfort.

Creation of Negative Thoughts: Memories create thoughts that focus on avoiding the discomfort, which in turn creates fear and worry.

Anxiety maintenance: These thoughts reinforce anxiety and activate the body's stress response, starting the cycle all over again.

To make this concept clearer, I have created a simple diagram model that shows the cycle:

Anxiety → Memory → Thoughts → More anxiety

When we talk about erasing or removing memory, it is theoretical, as memory cannot be directly erased.

But you can forget.

Forgetting is a natural process that helps prioritize and manage information by allowing less relevant memories to fade over time. Less relevant memories are those that are used less frequently.

By not focusing on memories related to anxiety, these memories will fade over time and become less prominent.

For memories to remain active, they need to be repeated or recalled often.

That's why it's important to minimize the focus on anxiety so it's not recalled regularly.

Your first anxiety episode can trigger new ones because the memories create negative thoughts, which in turn trigger the symptoms. This repeats the anxiety process. Your reaction and behavior remain the same because the same thoughts trigger the same chemistry and the same unpleasant symptoms. Therefore, you react again with panic.

It is necessary to work with the stored anxiety experiences in the memory. The longer you have had anxiety, the more ingrained the memory becomes. This means that the memory becomes stronger, and it can be more challenging to change this memory.

Memory works like this: When you read an article, you've forgotten most of it by the end of the reading. But if you read the article again and again, more information is stored in long-term memory, as repetition signals that the information is important. This process is called learning. All our knowledge is acquired through repetition: walking, cycling, language, grammar, arithmetic, tying shoelaces, dressing, specialized knowledge, etc.

Similarly, anxiety is learned through our repetitive reactions and behaviors to symptoms. This also means that anxiety can be unlearned through repetition. We have a memory defense mechanism that protects us from changing our learned negative memory. For example, that snakes are dangerous, that a certain path is dangerous to follow, or that jumping a red light is dangerous. This defense mechanism makes it challenging to change learned negative memories, such as experiencing anxiety in a certain place. After a long period of anxiety, it can seem difficult to imagine ever being anxiety-free again due to the many memories of anxiety experiences.

The three types of memory

Sensory memory.

Sensory memory is where impressions from the outside world are first registered and stored via our senses. These impressions are only stored for a short time, around one second. Examples of sensory memory include visual memory, which stores visual impressions, and auditory memory, which stores sound impressions.

The seven senses are: hearing, touch, sight, smell, taste, balance and movement. Each of these senses has a memory space. Only a small part of the sensory impressions is registered, depending on what the attention is focused on. The sensations that are focused on are transferred from sensory memory to short-term memory.

Short-term memory.

Short-term memory acts as a temporary storage device for information. This information can be quickly lost or replaced if new information requires attention. Information that is repeated and given meaning will be transferred to long-term memory, as happens in learning.

Working memory is part of short-term memory, where new information is processed with the help of long-term memory.

Long-term memory.

Long-term memory is where information can be stored for hours or a lifetime. It contains knowledge, memories, skills, etc. Information in short-term memory typically activates knowledge in long-term memory if that knowledge is already known. Long-term memory has an unlimited capacity.

This was just a brief review of memory. It's complicated.

A review of memory at the beginning of an anxiety episode.

Sensory memory records the initial anxiety sensations and muscle movements, which are then stored in short-term memory. Working memory checks whether a similar memory exists in long-term memory. Often there is, because previous experiences of anxiety have been stored. This new anxiety experience is therefore also stored in long-term memory. Repeated anxiety experiences lead to these memories being stored in long-term memory.

This process can be complex. Long-term memory contributes to the fear of repetition, making the anxiety difficult to get rid of. The memory is reviewed to find out if a similar situation has been experienced before. When this is the case, this memory is retrieved and forms the basis of the current thoughts.

If anxiety was only stored in short-term memory, it might be less stressful. However, due to the body's reaction of panic, it is perceived as a danger and therefore stored in long-term memory.

Again. Memory plays a crucial role in the experience of anxiety in different situations. Without the memory of past anxiety, we would not experience anxiety as there would be no memory of the anxiety to trigger it.

Memory is unreliable

Anxiety is activated by the amygdala when we face a potential danger. In such situations, other parts of the brain are also activated to determine how to respond to this threat and which aspects of the experience to store. Elements of the anxiety experience are stored in both the amygdala and hippocampus.

Our memory never records 100% of our experiences as it is constantly changing. Memory is made up of small networks of cells that are constantly changing. When new memories are formed, new neural pathways and connections are created in the brain. These neural pathways and connections change continuously, which means that our memory changes over time.

Therefore, memory is not static like a photograph that always shows the same image. When we try to recall something, information is retrieved from different areas of the brain. But since the neural pathways and connections have changed over time, we don't have an exact representation of the events, the brain makes an educated guess based on available information by forming new neural pathways and connections.

The structure of the brain is constantly changing due to the continuous formation of new neural pathways and connections, making the brain plastic (changeable). Experiential and learning memory are localized in different areas of the brain, ensuring that the learned material is retained. When recalling an experience, memory is easily modified because of the newly formed neural pathways and connections, causing original experiences to gradually change and eventually become partially forgotten. We reconstruct our memories of events, including anxiety experiences, with this constructed version replacing the original memory. This phenomenon applies to almost all experiences. Negative thoughts about the anxiety create persistent false memories that displace the actual experience. Furthermore, the brain stores more negative than positive experiences as a protective mechanism. By systematically changing the recollection of anxious memories, we can reduce the level of anxiety experienced.

Anxiety and memory

Memory is stored as small electrical impulses in the brain. It is not something physical, but feels like an internal image created by electrical cell connections. When we think, these networks are activated and form our awareness of the thought or memory.

When the thought disappears, the connections are switched off again. Therefore, thoughts and memory only exist for a short time. We have space for many cell networks, just like an electronic device with RAM, but humans have almost unlimited storage space.

We can remember our entire lives without having to upgrade our memory. But if the memory area is damaged, memory disappears completely. This also applies to other brain functions such as speech, vision, smell and movement.

Our life experiences are also influenced by the mutability of memory, resulting in us only being able to recall fragments of our experiences throughout life. Thus, we "forget" many things over the years.

The ability to form new memory networks is the reason why people often have many thoughts and memories about anxiety. Every time a new thought about anxiety arises, a new memory image is formed, which can lead to more thoughts about the same topic. These thoughts are also stored in the memory. Therefore, it may be necessary to stop the formation of anxiety thoughts altogether, rather than simply changing or restructuring them.

Chapter 18: The modern anxiety

Today, most of the anxiety occurs as a reaction to our life situation and the challenges that modern society presents us with. It is no longer primarily past trauma that triggers anxiety, but rather the stress created by our technological and social society. Before the year 2000, most anxiety triggers were often related to childhood trauma, which the author himself experienced back in 1676.

It seems unlikely that approximately 350 million people worldwide would suddenly suffer from anxiety within 25 years if anxiety is considered solely as a disease. It is far more likely that societal changes, especially the spread of technology, have created new challenges that our psyche was not prepared for.

Professional misunderstandings

One challenge in the study of anxiety is that it is primarily conducted by professionals who base their research on beliefs and assumptions that anxiety is a disease. There are no studies where illness is not a fundamental premise. This results in a lack of progress in the understanding of anxiety. When treatments are developed based on incorrect assumptions, future treatments are also likely to fail - as seen with the third-generation cognitive approach. This approach has not yet solved the problem of anxiety as it still relies on assumptions from the 1660s, maintaining a complicated methodology that is not necessarily effective.

Chapter 19: Is anxiety a disease

Scientifically speaking, anxiety is not classified as a disease as the feeling is caused by the body's chemistry, including adrenaline, and is therefore not caused by a disease, no matter how unpleasant or

intense the symptoms may be. What professionals refer to as a disease is our reaction to the anxiety, which is also not a disease, but a normal and rational response to discomfort that is encoded as a defense mechanism against such feelings.

In our opinion, irrational anxiety should probably never have been categorized as a psychiatric or medical problem. In fact, it is rather a psychological phenomenon that challenges us mentally. It's about feelings that scare us and that we can't control with our thoughts in the way we want. This is why many people seek help.

Historically, anxiety was considered a mental disorder because it is unpleasant and because people - just like today - feel sick when they experience it and therefore seek medical help.

Irrational anxiety is a relatively new phenomenon in human history, so new that we have yet to develop rational methods to deal with it. Therefore, it's not surprising that we still face challenges in tackling the negative consequences of this condition, such as irrational anxiety.

Irrational anxiety does not necessarily indicate that there is something wrong with us. Rather, it signals that there are challenges or conflicts in our lives that require our attention. Ignoring these challenges can lead to the experience of irrational anxiety.

The paradox of irrational anxiety is that it both originates from our thoughts and is simultaneously maintained by them.

The body creates the condition

It is essential to understand that anxiety is a physical condition where the body reacts as a protective mechanism against discomfort. Therefore, anxiety diagnoses are not classified as disease or disorder diagnoses, but as condition diagnoses. A condition is temporary and cannot be maintained constantly. You can't be anxious all the time, just as you can't be angry or happy all the time. These emotions are caused by chemical processes in the body, and anxiety is just one of these physical states that will also fade over time.

The role of memory

The inability to recall the first anxiety experience would likely mean the absence of anxiety today. This is because it is the memory of the discomfort of the initial anxiety experience that creates the fear of its recurrence. This memory forms an anticipation of future anxiety, which becomes the source of current anxiety.

Treatment myths

A major challenge in the modern understanding of anxiety is the assumption that medication and therapy are the only effective treatment methods. However, medication has not been scientifically proven to be effective for anxiety, there is only evidence that it helps certain individuals. The same goes for many forms of therapy. These methods are based on evidence rather than science. The difference is that evidence simply indicates that something has been effective for some people in certain circumstances, without necessarily explaining why.

Anxiolytic strategies at the source

The most effective way to manage anxiety is to interrupt the constant misinterpretations. It is essential to train the brain to understand that the symptoms you are experiencing are not dangerous. This requires

sustained effort and is not a quick fix, but it can result in a significant improvement in quality of life. Instead of waiting weeks or months for medication to work, you can immediately start reinterpreting the body's signals.

Irrational anxiety should be stopped as soon as possible after the first experiences.

The best intervention comes immediately after the first attack, as the anxiety is not yet "set" by all your beliefs about illness. Therefore, it is crucial that a common material is prepared with correct information regarding the first anxiety symptoms and attacks and how to avoid more anxiety afterwards, as well as information about what is happening in their body, to avoid misinterpreting any new symptoms as illness. This common material should be available to healthcare professionals, especially doctors, who are often the first point of contact for patients experiencing anxiety. The material can be requested from Generation-anxiety.com for review.

The truth about anxiety

The reality we must recognize is that anxiety should not be considered a disease if you want to overcome it. The solution cannot be left solely to doctors, therapists or medication, as these methods often fail to address the very core of the problem: one's own misunderstanding and perception of what anxiety is and how it works. Changing this understanding requires an active effort on the part of the individual. If the established treatment methods for anxiety had been fully effective, anxiety problems would be far less prevalent today.

Reinterpret your symptoms

To get rid of anxiety, you need to learn how to reinterpret the misinterpretations that perpetuate it.

It's important to understand that anxiety symptoms are not dangerous, our body is simply reacting to a temporary chemical reaction. With the right knowledge, you can rationally understand what is happening in your body and why you react to anxiety the way you do. This understanding removes the fear of anxiety.

Closing

Anxiety is not a disease, but a condition created by body chemistry and irrational thoughts triggered by life challenges. By changing your perception of anxiety and its function, you can begin to overcome it. This requires acceptance of the above information.

Chapter 20: My first anxiety attack

This is a story about how wrong it can go if you misinterpret anxiety symptoms the first time you experience them.

Suddenly I was lying on the floor screaming and shouting while all my colleagues were looking at me. Two of them held me down and 911 was called. It was 1676 and I was 16 years old. This first experience is very closely linked to everything I've experienced with anxiety in my life since.

If you've experienced Irrational Anxiety, I'm pretty sure your first anxiety attack scared you too. Maybe you also misinterpreted what you were feeling and panicked like I did. This happens when we can't figure out what's going on with our body and our emotions. We get scared, fear the worst and usually end up

panicking.

My reaction to what I felt triggered a chemical reaction that I felt throughout my body. Namely, anxiety. This happened because my body interpreted my reaction as a great danger. The body only wanted to help by sending me into a state of anxiety so that I could get away from the danger that surely must have been there.

But there was no danger. So why did it happen anyway? I believed 100% that I was going to die, and it stuck with me. Going forward, my thoughts were: "Oh no, I hope it doesn't happen again." Now the fear of the fear was planted firmly in my memory. It was allowed to dominate and destroy my life for many years.

I was now afraid of being afraid. So, I became afraid. Of everything. We think about fear to avoid it. But when we think about fear, we get it. If you say: "I don't want anxiety" or "I can't have anxiety," you're very likely to get it.

Today, I have waited about 15,000 days for something that can never happen - dying during an anxiety attack. I was convinced that I would die today or tomorrow. I could feel it.

It was like that for about 35 years. But as you can read in this text, I did not die. And neither will you from Irrational Anxiety.

I was "victimized" by random coincidences that the brain misinterpreted as causality because of my reaction to what I felt. First anxiety attacks are usually a coincidence of different circumstances and coincidences. If the first anxiety symptoms are misinterpreted, so are subsequent symptoms. It's a psychological predetermination.

If I could jump into a time machine today and travel back to 1676 with the knowledge I have today, I would probably never have anxiety. But I can't (yet). I would have said to myself: "Hmm, that stings a bit? It's probably just that damn pectoral muscle or nerve that's been bothering me before. Never mind - it'll be gone in a minute." Because it always is. That's what I do today because I know it's just feelings and not reality.

Today I know that the heart is well protected behind the ribs and doesn't "just" stop on its own. Especially not when I was young. Now I'm over 60 with thousands of anxiety symptoms behind me and a heart that has beaten about 3 billion (3,000,000,000,000) times and will probably beat flawlessly for the next 1 billion beats.

And that's why I know it takes more than just a thought, symptom or feeling to stop the heart. The heart is pure engineering by nature, just like everything else in the body. Unstoppable.

So no, a heart does not stop during an anxiety attack. We have no control over that. One of the things that tricks us is the adrenaline. Because of my lack of knowledge, I panicked over that nervous muscle or nerve. And it changed my whole life. From then on, my life was lived in a "state of anxiety". I couldn't do anything. Whatever I did, it was in a state of anxiety. Meetings, going to and from work, picking up/dropping off kids, driving, shopping, visiting - all in anxiety mode. It's a wonder I got my IT degree. I had symptoms every single day during the program.

The worst was when I had to present. Most of the time I would rush out of the room. It was insane. This was also the beginning of my self-medication with alcohol, which lasted about 8 years. This anxiety state continued until 2017. It would be too extensive to describe everything. The above was a summary.

Try to think back to your first attack or anxiety symptoms. Could you have acted differently too? I'm pretty sure you could have. And if you then ask: "What would life have been like if I hadn't misinterpreted that

day?" I'm sure my life would have been very different than it was and is today.

Today, after so many years, it's hard to imagine a life without limitations. I'm only starting to experience it now. The scary thing is that all my choices in life after that first anxiety attack were made based on how I felt, not what I wanted to do. Everything I wanted to do was held back by my emotions and fear of anxiety. That's why I always "settled" and took the easy and straightforward choices. I couldn't do anything else. I had become afraid of everything.

This has had major consequences for many people. I ended up living a very limited life for many years, with no freedom of choice.

It all became a thousand times easier when I understood that I wasn't sick, what triggers an anxiety attack, that it's not dangerous and that you can't die from it.

In 1979, the public didn't know what anxiety was. You were either paranoid, schizophrenic or manic-depressive. I lived in total ignorance for 16 years (1976-1995) about my symptoms. I had no idea what was happening to me. No doctor or health care system had an explanation for my condition for those many years. I was always told that there was nothing wrong with me. But I could feel that something was wrong. Back in the 1980s and 90s, there was no internet, anxiety associations, Facebook, etc. And that's why people didn't talk about it. There was no one to talk to. No one knew anything about anxiety.

So, I dealt with it alone, which probably wasn't healthy. I just lived with all the seizures and symptoms as best I could, but at great inconvenience to my family and myself.

I first heard the word anxiety in 1995. It was in connection with a new test I took with my doctor. Diagnosis: panic anxiety, and I was then prescribed some of the first "happiness" pills in Denmark, Seroxat. However, they didn't help with the anxiety. I only got even more "issues" because of the side effects. From having nothing physically wrong, I now had physical limitations due to medication for something the doctor told me was mental.

After the first seizure at my job, I was taken to hospital by ambulance. After a one-hour examination, I was told there was nothing wrong with me. I was on sick leave for 3 weeks afterwards. I couldn't do anything. I just sat in my room all the time. During the same period, I was referred to a psychiatrist, where I was prescribed Stesolid because of bad nerves (which it wasn't). It was the first of many symptom treatments I have received in my life.

That's how I lived until some unpleasant anxiety experiences in 2016 made me stop and investigate the matter myself and finally got out of the anxiety.

I have included my story so that the younger part of the readers (maybe it's you?) can learn from it and not end up in a life like I did. Stuck and not taking responsibility for themselves. Luckily, you get all the knowledge you need with this book, which I lacked for so many years. I also included my story to share that it wasn't that long ago that we were walking alone with our anxiety without any help from anyone.

Chapter 21: Our desire to avoid discomfort

Humans have an instinct to avoid discomfort that protects us from danger and helps us make decisions that promote our well-being. This desire to avoid discomfort is an internal process in the body that is activated repeatedly if we have memories of past anxiety experiences, as these memories contain anxiety discomfort that the process wants us to avoid.

No amount of thought, medication or known therapies can change this process. Therefore, we continue to experience anxiety. The only solution is to "erase" the memory of the past anxiety experiences so that future anxiety discomfort can be avoided.

To understand why anxiety repeatedly occurs, it can be simplified as follows:

Anxiety symptoms and attacks occur again and again because memory activates thoughts of previous unpleasant anxiety experiences.

It's important to understand that our natural tendency to avoid discomfort responds to the stored memories of past experiences of anxiety. Our fear of discomfort and the memories of past anxiety experiences are what produce all future anxiety. It is thus clear that the memory of the anxiety is the main problem, as this memory triggers further anxiety through the thoughts created by the memory.

Resume:

Anxiety is typically first triggered by something in your life situation and is often unexpected. Subsequent anxiety reactions are triggered by the memory of the first experience and the desire to avoid the discomfort associated with it.

If the first experience of anxiety had not been associated with discomfort, it would probably not be triggered again without a clear cause.

The first experience of anxiety is an acute, isolated and often unclear event, just like rational anxiety is, but with a clear cause.

Hypothesis

Could anxiety possibly not be a disease, but rather a natural bodily reaction to the desire to avoid discomfort that we often misunderstand, misinterpret and complicate?

By viewing all subsequent anxiety as a memory-based response, we can conclude that anxiety is not necessarily a mental disorder, but a natural response to our fear of discomfort, among other things.

Examining our desire to avoid discomfort.

It is possible to understand how strong this desire is by looking at the actions we take to avoid unpleasant feelings and experiences.

Many people choose to take different medications with no guarantee of efficacy and accept possible side effects. They change their daily routines and refrain from participating in usual activities. Some people also choose to stay at home for longer periods to avoid discomfort.

How do we know it's our memory that triggers the subsequent anxiety?

If you imagine that all memories of anxiety are gone, you can't remember ever experiencing irrational anxiety.

If you are asked what anxiety is, you don't know how to answer because you can no longer remember the feeling of discomfort. This is like being in the situation before you experienced anxiety for the first time. Therefore, you don't know what anxiety is because you no longer have a memory of the discomfort. Therefore, it can be concluded that subsequent anxiety only occurs because we have memories of the first unpleasant anxiety experience.

There are often two statements when it comes to anxiety diagnoses.

It is important to note that there is no single cause of anxiety, so treatment should be individualized. It is also important to recognize that we are all different and that the treatment method that works for one person may not work for another.

Let's examine the accuracy of these statements. It is often claimed that anxiety is a complex disorder that requires individualized treatment because "we are all different". Many argue that there is no universal solution to anxiety problems and that individual differences necessitate tailored treatment plans. But is this really, correct?

No, this perception is a big misconception. By focusing solely on individualized treatment of anxiety, many risk remaining trapped in their condition for years or, in the worst case, for the rest of their lives.

Let me explain the reason.

The traditional understanding of anxiety is that there are many different causes and that we react individually. The first encounter with anxiety can be due to several factors such as genetics, social background, trauma or other circumstances. However, after this initial experience, there is a common mechanism: the fear of reliving the unpleasant symptoms perpetuates the anxiety.

After the initial anxiety experience, people begin to avoid situations that may trigger anxiety and invest a lot of time thinking about how to avoid a recurrence of the symptoms. It is this common desire to avoid discomfort that creates the ongoing anxiety, rather than individual differences.

This perception is widespread because it is convenient and easy to understand. When practitioners and therapists cannot explain the lack of effect of a treatment, it is easier to say: "It's because we're all different," rather than questioning the treatment method itself.

Individualized treatment often focuses on adapting treatment to the person's specific symptoms and personal history. However, this misses an important point: anxiety is not a condition with many different manifestations that require varied treatment approaches. Anxiety is a psychological condition brought on by one factor: the fear of reliving the discomfort. This fear is universal and can therefore be treated the same for all patients.

When anxiety treatment is individualized, another common cause of anxiety is overlooked: the mistaken belief that anxiety is dangerous and should be avoided. Whatever the form of anxiety - generalized, social phobia or panic disorder - it is caused by the fear of anxiety itself. We need to break the idea that anxiety requires many different treatments and recognize that one method can help everyone.

Instead of looking for the "right" treatment, we should focus on developing an effective solution for all irrational anxiety.

All anxiety creates fear of more anxiety, otherwise it's not anxiety.

Several scientific studies have shown that the subsequent anxiety arises from this encoded defense mechanism in the brain, which is activated to protect against discomfort.

It's almost impossible to avoid adrenaline-triggered discomfort in the same way we can with physical causes of discomfort such as pain or temperature changes. This creates a confusion in the body's desire to avoid discomfort when it fails, leading to the irrational reactions to anxiety symptoms.

These assumptions form the basis of our anxiety management methodology.

Part 4: The method

Chapter 22: Why was the method developed?

Our method was developed in 2018 by Generation-Anxiety.com in response to the lack of desired effects of existing anxiety treatment methods that I, the author, and many others have experienced over the years. For the sake of clarity, sources are not listed here, but a Google search for "criticism of anxiety treatment" will shed further light on the subject.

The GA Method is a lifestyle change approach that aims to shift from negative to positive thinking. The aim was to develop a simple, practical and effective method for all anxiety sufferers that could be used without the need for therapeutic or medical assistance. It was essential that the method could be implemented at home, making it available around the clock.

By making this method easy to understand and use, it offers an alternative to those who have given up on more conventional therapies.

We recognize that both Cognitive Behavioral Therapy (CBT) and medical treatment have made significant contributions to reducing symptoms and improving quality of life for many people. CBT has proven effective in changing negative thought patterns for many, while medication can relieve the most intense symptoms by balancing chemical processes in the brain. However, medication has the disadvantage that it can take many weeks before any effect is felt, meaning that the patient is left alone with their anxiety during this period, which is inappropriate.

Our method offers an alternative approach to tackling this problem. Instead of focusing on the symptoms or trying to change thoughts directly, the method draws attention to the memory of past anxiety experiences and the beliefs that maintain the feeling of illness. It assumes that it is our beliefs about anxiety and the memories we carry with us that keep us in a state of persistent anxiety.

With this approach, the method aims to reprogram the brain's response to the anxiety memories. In this way, it offers a new way of dealing with anxiety, without replacing existing methods, but as a supplement or alternative for those who have not yet found sufficient relief.

The method was designed to give people a method they could use in their own home and everyday life to change their belief that they are suffering from anxiety.

The method is a potentially universal treatment method for anxiety, based on the scientific realization that persistent anxiety is primarily caused by fear of further anxiety. This fear leads to increased anxiety through memories of past experiences and our natural tendency to avoid discomfort. Therefore, we do not consider anxiety as a mental illness or disease in general, but as a psychological process triggered by the fear of repeated anxiety.

We don't need to focus on the symptoms of the different anxiety diagnoses to understand that the fear of repetition plays a crucial role in all cases. The symptoms are therefore irrelevant, as it is always the fear of more anxiety that lies at the heart of all anxiety disorders. **It is this fear that we want to treat, not the symptoms.**

Irrational anxiety is thus perpetuated by a combination of misinterpretation of symptoms, avoidance behaviors and excessive attention to threats from symptoms that do not exist.

Focusing on reducing anxiety about anxiety itself is a highly effective method, as this "Meta-anxiety" is the primary reason why anxiety states are maintained. By eliminating the fear of the anxiety itself, you break the self-reinforcing cycle that maintains anxiety across different diagnoses.

It is important to recognize that the differences between anxiety diagnoses are mainly small variations in symptoms and triggers. These variations do not change the core issue behind all anxiety, namely our misinterpretation of symptoms, avoidance behavior and fear of repetition.

The reason we misinterpret anxiety symptoms lies in the partial or complete shutdown of the neocortex when anxiety-related chemicals are released in the body. This happens because we are coded to act instead of thinking about the anxiety. The misinterpretation therefore occurs because we are not acting in accordance with our encoded instincts.

Misinterpretations occur with all anxiety diagnoses.

Apart from minor differences in symptoms and causes, the process behind irrational anxiety is the same for all people. Anxiety is anxiety, no matter what term is used.

Anxiety diagnoses have more in common than differences. Regardless of the anxiety diagnosis, the fear will always be directed towards more anxiety and not the situation itself. The situation simply defines the trigger, e.g. social anxiety, generalized anxiety, health anxiety, etc.

Therefore, anxiety can be considered as a unified diagnosis. The diagnosis could appropriately be labeled: **Fear of more anxiety**, as this fear is present in all diagnoses and what is desired to be treated across them.

All anxiety diagnoses manifest physically with the same symptoms due to our similar body chemistry. Our method focuses on preventing the process of creating the symptoms, not treating them. **If the symptoms are stopped, the anxiety stops too.**

That's why a One for All solution is possible.

Medication, cognitive behavioral therapy (CBT) and metacognitive therapy (MCT) can help, but with anxiety diagnoses it can be problematic. Cognitive therapies constantly remind people of their anxiety, as the word "anxiety" is used frequently. This focus on anxiety perpetuates the problem, as does medication, which reminds you of the anxiety every time you take it.

Our method uses an approach where you are assumed not to be ill. This shift in the assumption of anxiety is important as it helps prevent anxiety thoughts from arising via memory.

Often it is the misinterpretation of the body's signaling chemistry that triggers a panic reaction. Therefore, this misinterpretation should be reinterpreted as soon as possible after an anxiety episode. By consciously considering that there is nothing wrong after an anxiety attack, even if it was unpleasant, you can stop the negative thought spiral. If you can do this, you can prevent anxiety from developing into a persistent problem.

The uncomfortable symptoms we experience are due to our body chemistry.

When anxiety develops into a disorder, it's primarily because we don't change our misinterpretations of the chemical symptoms. I emphasize "chemical symptoms" to clarify that anxiety symptoms are not created by illness, but by the body's own chemistry.

If these misinterpretations were corrected after the first anxiety experiences, for example through information and education, many anxiety diagnoses could be avoided. It is essential to inform patients about what they have experienced and why, rather than simply diagnosing and medicating. Irrational anxiety always has a rational cause, which the doctor could easily explain in 5-10 minutes during the first consultation with a patient who has experienced anxiety symptoms.

If we didn't misinterpret the symptoms and their discomfort, anxiety thoughts would not arise afterwards. The anxiety spiral only continues if it is fed with misinterpretations of the anxiety symptoms.

It's important to understand that anxiety is only alive because we feed it. Only you can stop feeding it. Medication or therapies can help in other ways.

Conclusion:

To become anxiety-free, we must avoid misinterpreting our symptoms and thus stop the formation of more unpleasant anxiety memories and thoughts. Without memories of anxiety, subsequent anxiety cannot be triggered. Notes. Memories were only created after the first unpleasant anxiety experience.

Chapter 23: What does the research say about the Method?

Although this method is a new approach, it builds on several well-established principles in psychology and neuroscience, as documented in various studies:

The effect of self-conviction:

Research in cognitive psychology indicates that self-disclosure can change thought patterns and beliefs. Studies published in journals such as the Journal of Cognitive Therapy and Research show that repeated self-disclosure can reduce negative automatic thoughts that are often associated with anxiety disorders.

The Role of Memory in Anxiety Reactions:

Neuroscience studies have shown that memory plays a central role in persistent anxiety. Research from journals such as Nature Neuroscience has shown that memories of past anxiety experiences can trigger

new anxiety reactions, even in the absence of real danger. This supports the method's focus on changing these negative memories.

Avoiding Negative Labels:

Research into psychological framing and the labeling effect indicates that the use of negative labels like "I have anxiety" can reinforce feelings of helplessness and perpetuate anxiety. Studies from the American Psychological Association show that adjusting our language can have a positive impact on our self-perception and mental health.

Exposure without reaction:

Exposure is widely used in the treatment of anxiety disorders and involves repeated exposure to anxiety-relieving stimuli without engaging in avoidance behaviors. According to studies from the Journal of Anxiety Disorders, this method can reduce anxiety over time as the brain learns that the situation does not pose a real threat.

These research-based principles illustrate that every aspect of our methodology is rooted in well-documented psychological mechanisms, which explains the effectiveness of the method.

To these principles we, Generation-Anxiety.com, have added the poster method, the notes to carry on the small exposure tours and background images on all devices, mobile, tablets, etc., as the principles mentioned above did not prove to be strong enough in themselves to become anxiety-free.

The combination of visual and verbal self-conviction, as well as the small bills for exposure, made all the difference and turned it into the effective method it is today.

The method has a wide range of applications, not just for anxiety.

Much of our language often describes our condition as negative. The method will change negative self-talk about your condition to positive.

Chapter 24: Practical methods to overcome anxiety

Our method can be compared to cognitive restructuring-based therapy. Although our method is not identical to this form of therapy, it is the most scientific parallel. We focus on restructuring anxiety beliefs by eliminating the memory of past anxiety experiences, as these form the basis for future anxiety thoughts.

Introduction

Our method is effective for all anxiety diagnoses, as all anxiety diagnoses have some common challenges, and the method can be adjusted to the individual diagnosis. Traditional therapies such as cognitive behavioral therapy (CBT), medication or mindfulness only partially work for many. This has created a need for an approach that fundamentally changes the way anxiety is perceived, processed and treated.

Cognitive therapies are not a solution for everyone as they are costly, time-consuming and require a therapist and are therefore reserved for the few. CBT and MCT are one-to-one solutions, which is not optimal with over 350 million anxiety diagnoses worldwide.

Our Anxiety Management Method has been developed to address this need. The method is based on simple yet effective principles that have proven to be very useful in helping people manage anxiety permanently.

The results behind the effectiveness of the method.

Sustained freedom from anxiety: Simple and cost-effective:

The method requires no medication, expensive sessions with therapists or complicated programs. The material can be downloaded for free by anyone. The method is based on simple principles that are easy to follow in everyday life. The method supports the patient throughout the day.

Low relapse rate:

While other methods often lead to relapse for up to half of patients, this method has a documented relapse rate of approximately 5% among those who maintain the techniques from the method.

The effectiveness of the method is due to a unique approach: It helps change anxiety-provoking beliefs in the brain to an understanding that anxiety is a chemical reaction, not a disease. This approach reduces the fear of the anxiety and thus reduces the symptoms.

The method uses visual and verbal repetition of positive statements, transformative learning and focus shifting exposure.

What this means.

This means that the method is not just one among many other methods, but a method that is effective if tried. For those who have tried traditional paths without success, this method can offer a new opportunity for improvement.

Explanation of the method and its effectiveness

The method is an approach to managing anxiety that was developed in a non-traditional way. Normally a method is first described theoretically and then tested, but this method was first tested and then described. This happened because the method started as a spontaneous idea that was tested without a prior detailed plan.

The method assumes that the main problem with anxiety is not the anxiety itself, but the discomfort it creates. The method is relatively simple in concept and does not seek to analyze the anxiety in detail or change one's thoughts. Instead, it focuses on helping individuals eliminate or deal with the discomfort the anxiety creates after the anxiety experience that gets stored in the memory.

Instead of concentrating on the causes of anxiety, the focus is on avoiding the discomfort it causes. The method is so simple that it can be difficult to describe in detail. There is no scientific foundation behind the method, as is the case with other methods. It is primarily a practical approach rather than a theoretical one that is learned through practical exercises. Instead of debating the potential impact of the method, it was tested to observe its effect.

The method eliminates the discomfort of anxiety, instead of understanding all the causes. The cause is rarely the problem, the discomfort is. When we experience something unpleasant for the first time, the brain forms a strong memory trace. This trace is associated with thoughts, emotions and bodily reactions

as part of the brain's survival mechanism.

An anxiety experience is stored as a powerful emotional memory that is quickly activated. **It is stored memory of the anxiety that repeatedly activates the thoughts.**

Overwriting anxiety-related memories can bring the brain back to a neutral, non-anxious state. However, this requires repeated effort. Instead of treating the symptoms, we need to change the core of what triggers the anxiety.

IMPORTANT: Anxiety is problematic because of its discomfort. If it wasn't uncomfortable, we would probably ignore it. By removing the discomfort, you will no longer fear the anxiety. It's hard to fear something you don't know what it feels like.

The goal is therefore to eliminate the discomfort associated with anxiety. After years of research, this can only be achieved in one way: **by not triggering more anxiety thoughts.**

Since anxiety thoughts are triggered by past unpleasant experiences, the goal is to remove these unpleasant memories. Yes, it is possible.

Methods to do so include Visual and verbal exposure, psychoeducation, transformation, posters and positive affirmations.

Again. Anxiety makes us feel sick because of the discomfort. This creates a belief that we are sick when we experience anxiety. This belief, along with the discomfort of anxiety, is the reason we seek medical help, take medication or go to therapy. These are facts. **This belief about illness is also stored in memory.**

So, we have two things stored in our memory: 1. Past anxiety experiences and 2. Your belief that you are probably sick, which helps trigger future anxiety.

The next step is to convince ourselves that we are not sick with anxiety just because we experience anxiety symptoms. It is crucial to convince yourself that you are not sick after the first anxiety experiences. If you fail to do this, the anxiety will continue as the belief of illness will trigger new symptoms again and again.

The phrase "I'm not sick" and "I'm not sick" posters will challenge your negative beliefs about illness and affect your memory of past anxiety experiences. Every time you say or see the "I'm not sick" poster, you are instilling a positive belief in your brain.

It is not possible to think "I have anxiety" and "I am not sick" at the same time, as this creates a cognitive dissonance. Consider saying, "I have anxiety, but I'm not sick". This statement feels paradoxical because it combines positive and negative statements. The brain can only accept one belief at a time and will typically choose the negative one. Therefore, the phrase "I have anxiety" should be avoided and replaced with the positive phrase **"I am not sick."**

When posters with the text "I'm not sick" are put up, the focus changes and consciousness is challenged by the conflicting statements. Because "I'm not sick" is now visible throughout the home, it becomes the dominant belief. The phrase "I have anxiety" will then only be present in memory and not trigger anxiety thoughts if the focus is on "I'm not sick."

However, simply having posters up is not enough, as anxiety can be persistent and not easily convinced of its absence. This is due to the brain's negative bias, which is designed to protect us.

Every time you **don't** focus on the poster or the phrase "I'm not sick", the old beliefs arise again: "I have anxiety", "I am sick" etc., because of this negative bias. As a rule of thumb, it takes many positive beliefs - say 10,000 - to remove one negative belief. Therefore, it is a slow process.

By telling yourself that you are not sick, you indirectly communicate that you do not have anxiety, since anxiety is described as a disease. The previous anxiety memory is gradually overwritten thanks to brain plasticity. The brain gradually forms new beliefs about not being sick because this belief has been in focus for a long time and is now perceived as true. Over time, the anxiety memory becomes less prominent because it is no longer activated as often.

The main problem is addressed when we are convinced that we no longer have anxiety and therefore do not consider ourselves sick. This is about your current state of anxiety. In the future, new challenges and situations may arise where anxiety may reoccur. At that point, you will have the tools to deal with it.

Many may question this approach as they don't understand the impact of the combination of the statement "I am not sick" and the poster text "I am not sick". It can be misconstrued as just positive thinking or self-affirmation, which it is not.

It is an effective persuasion technique that has been proven to be effective against anxiety. Repetition is a key element of this method. When you hear something repeatedly, you start to believe it - this is a psychological fact. The method can be seen as a form of self-influence.

The aim of the method is to help individuals overcome irrational anxiety by transforming their negative beliefs about anxiety into positive ones.

Overview of the Method

Concept: The method involves practicing positive self-talk rather than negative.

The method uses transformative learning, which means changing a belief through new learning experiences. For example, from *I have anxiety* to *I don't have anxiety*. Unlike other methods that work with changing **thought patterns**, our method takes a step back in the process to before the anxiety thoughts occur. It addresses the fear of the anxiety that causes the anxiety thoughts.

Purpose

The goal is not necessarily to become anxiety-free, but to convince yourself that you are not sick just because you experience anxiety symptoms. It's about stopping misinterpreting all symptoms as signs of illness, which over time reduces the symptoms, which is our desired outcome. It is essential to be aware that it is primarily the persistent misinterpretation of anxiety symptoms as illness that maintains anxiety. Therefore, these misinterpretations must be stopped.

Disclaimer: The statement "I'm not sick" should only be used for anxiety diagnoses and never for other diagnosed illnesses.

Why does the method work?

It changes the way you think and talk about anxiety, which affects the brain's beliefs about anxiety. When you stop focusing on the negative, the brain loses interest and decides that maybe it wasn't that important after all. It's difficult to forget anxiety because we constantly remind ourselves of it through our thoughts

and behaviors, among other things.

If you can avoid focusing on the negative episodes (the anxiety), the brain will eventually make room for other things. The brain will think: *Why save an experience I'm not actively using?* What happens if in the future you only say: "I'm not sick" and thus reduce many anxiety thoughts? Or start avoiding phrases like *I have anxiety, I am anxious* or *My anxiety?*

Of course, at first you can't completely avoid anxiety thoughts, but you can reduce them by saying: "I'm not sick." Every time you say *I'm not sick*, anxiety thoughts are minimized. The longer and more often you do it, the less you will experience anxiety thoughts and symptoms, as the statement *I'm not sick* is reinforced in the brain every time it is said. Avoiding using the word "anxiety" in the future will lead to a positive change in your life situation.

How does the method work?

Changing beliefs: By repeating positive statements over a period, the brain begins to believe these statements. This can help change negative beliefs about anxiety into more positive and realistic ones. Using positive statements also reduces the focus on the negative anxiety thoughts.

Transformative learning: This method uses prolonged and repeated positive learning to reprogram the brain so that it no longer remembers past anxiety experiences.

Reducing self-scanning: Focusing on positive statements and posters reduces the tendency to self-scan for symptoms, reducing the influence of anxiety.

Anxiety memory removal: The method aims to reduce the negative memories of past anxiety experiences by replacing them with positive beliefs, which will make it harder for the brain to recreate anxiety symptoms as the triggering anxiety memories are reduced.

Practical application of the method

Daily repetition: Repeat positive statements like "I'm not sick" several times a day.

Visualize positive thinking: Put up posters with encouraging statements in places you often pass.

Possible positive journaling: Consider keeping a diary of your progress, focusing on the positive developments.

Conclusion:

Beliefs are formed by one's awareness of events. When anxiety is perceived as unpleasant, it can lead to a perception of illness. The mind interprets the symptoms as signs of illness, creating a potential perception of danger. This is the beginning of the thought patterns that arise. It is therefore necessary to change the beliefs about illness rather than just focusing on the thoughts.

The method is effective because it systematically changes the negative beliefs and thought patterns that maintain anxiety. By replacing them with positive and realistic beliefs, anxiety symptoms are quickly reduced and eliminated over time.

When our beliefs change, our thoughts adapt accordingly. Therefore, anxiety thoughts can be eliminated by changing anxiety beliefs. This method differs from CBT and MCT by focusing on eliminating the fear of discomfort rather than the anxiety itself.

Understanding the patient's needs. Our experience shows that people with anxiety need simple and clear instructions. They don't need diagnoses, medication or long-term treatment. They need reassurance, information and awareness that their symptoms are caused by misinterpretation of chemical reactions. With simple strategies, they can let go of their anxiety thoughts.

The method is highly effective because from the moment you use it, you are no longer alone with your negative thoughts, unless desired.

With other recognized methods, you can often feel alone with your negative thoughts, which can be problematic. Please note that this method does not include an actual treatment plan because there is nothing to treat, but rather something to change.

The method focuses on changing misconceptions about anxiety rather than curing a disease. The anxiety process in a nutshell

After a **first** anxiety attack, the following happens:

- Memory memories lead to anxiety thoughts.
- Anxiety thoughts cause body symptoms.
- Body symptoms can be misinterpreted and result in adrenaline release.
- Adrenaline release causes discomfort associated with anxiety.
- Discomfort associated with anxiety can lead to panic and create new memories. Back to #1 because:
- Memory memories create fear of repetition.
- Fear of repetition results in avoidance behavior.

Key to breaking the anxiety cycle:

To treat anxiety, it is important to address the avoidance behavior as this maintains and reinforces the anxiety problem. This can be done by working with the memory memories.

Irrational anxiety requires a specific treatment targeting the fear of more anxiety itself. Therefore, treatments should be developed that address the fear of more discomfort caused by anxiety.

Let's briefly explore why overcoming anxiety is often difficult for many.

The known treatment methods cite the following reasons if a treatment is not effective: **brain biology and chemistry, genetics and treatment resistance.** These factors are part of an individual's physiological makeup and can affect the response to treatments.

It is problematic to place the responsibility for a treatment not working on the patient. It is crucial to understand that it is not necessarily the patient's fault if a treatment does not work, the treatment may be insufficient.

If an anxiety treatment is not showing results, it doesn't necessarily mean there is something wrong with

the patient's brain biology, chemistry or genetics. It could also be the design and development of the treatment is not effective enough.

Chapter 25: What is transformative learning?

The brain is designed to protect us from new information that we don't like or disagree with. Therefore, new information must be repeated many times to change our perception. This phenomenon is called **transformative learning**, which means changing a belief through learning. The brain has a hard time accepting new information that goes against our existing beliefs. To change these beliefs, it is necessary to apply transformative learning, but this process can be challenging as it requires changing our previously learned beliefs. For example, the belief, *I have anxiety*.

Anxiety beliefs are particularly problematic as they are very strong beliefs.

Accepting that anxiety is not a disease therefore requires a comprehensive and persistent conviction to the contrary.

Accepting that anxiety is not a disease will also affect your self-perception of having anxiety. Questions like "Who am I without anxiety?", "What kind of person will I be?" and "What will my life be like without anxiety?" may arise.

To change an anxiety belief, one must challenge all previous assumptions about the anxiety. Learning the factual nature of anxiety can be challenging for many as it changes previous beliefs such as anxiety being a disease or a personal defect. While this process is not easy, persistence will lead to success over time.

As a writer, I am aware that anxiety should not necessarily be considered a disease or disorder. However, it can be challenging to convince readers of the same point of view. For example, I became anxiety-free when my beliefs changed. But even when presented with this experience, many may still have doubts, especially if they experience anxiety issues themselves.

Our beliefs around anxiety can be very strong.

No matter how much evidence can be presented that anxiety is not a disease, it can be difficult to convince someone who is firmly convinced they have anxiety otherwise.

If you believe this perspective is erroneous, it can be a significant challenge to help because your own beliefs about anxiety may prevent you from accepting this help.

It's important to note that there are many methods to become anxiety-free. This method is just One among many.

I am not sick

You may wonder why the statement "I'm not sick" is relevant. Anxiety and its associated symptoms can cause a constant feeling of illness. When you feel sick, you tend to think about it incessantly. This is perfectly normal; however, continuous thoughts of illness can amplify these feelings.

The statement "I am not sick" is powerful as it contradicts the negative beliefs that often accompany statements like "I have anxiety," "My anxiety," or "I am anxious." Other positive statements such as "I am

strong, "I'm ok," or "I can handle it" are also encouraging, but they don't address the specific feeling of being sick or having anxiety.

The intention of the statement "I'm not sick" is:

To help reduce the focus on anxiety.

Reducing the use of negative expressions like "I have anxiety" or "I am anxious," which is easier when you don't feel sick.

To remind you that anxiety does not necessarily mean you are sick. Anxiety is a natural emotion and is not a disease. Therefore, it is appropriate to say, "I'm not sick." in the context of anxiety.

Different thoughts arise depending on whether you say, "I have anxiety" or "I'm not sick." The former can promote negative, anxiety-reinforcing thoughts, while the latter can create more positive thoughts. By saying "I'm not sick," over time you can introduce doubt into the negative beliefs and reduce their power.

Imagine what could happen if you focused on saying "I'm not sick" instead of "I have anxiety" over a longer period. Which phrase would be more appropriate to repeat: "I have anxiety" or "I am not sick"? Which approach would be more likely to reduce anxiety?

Posters with the statement "I am not sick" will act as a constant reminder of this positive thought. Repeating such statements can support a more positive mindset in the same way that repeating negative statements affects our state of mind.

However, it's important to understand that positive thinking doesn't work in isolation. It needs to be supported by concrete actions and reminders, such as posters, to make a real difference.

Surrounding yourself with positive statements will help create a change in your mindset.

This is not meant to simplify anxiety disorders, which often require a more comprehensive treatment plan, including therapy, medication and lifestyle changes among other things. It should be considered as a supplement to the existing toolbox, especially if other methods have not yet proven effective.

Chapter 26: Who is the Method for?

The method is for anyone experiencing irrational anxiety symptoms or attacks regardless of diagnosis. Current anxiety treatment methods, such as medication, cognitive behavioral therapy (CBT), metacognitive therapy (MCT), and acceptance and commitment therapy (ACT), target individual needs. These approaches alone cannot solve the global anxiety problem. Therefore, there is a need to develop new, comprehensive treatment methods that can address anxiety in a broader and more effective way for everyone.

The method is not necessarily a universal solution, but it has potential. One advantage is that the treatment takes place at home and can be integrated into daily life, making it available all the time. This could revolutionize anxiety treatment. The success depends on the user's willingness to use the method. We found no reasons not to try the method.

If you suffer from anxiety and previous treatment methods have not been effective, it may be worth

considering alternative approaches. Testing new methods can potentially have a beneficial effect. Choosing not to try the proposed method may indicate that the anxiety may not be perceived as severe.

I emphasize this topic because I have personal experience with long-term anxiety over 38 years, which has had significant consequences on my life. Therefore, I urge you to act now to avoid similar situations with decades of anxiety.

Chapter 27: How to test the method?

With the theory in place, it's time to explore some simple everyday changes and actions that can help manage anxiety.

Introduction

As you know, anxiety symptoms often occur when attention is given to anxiety. This happens because thoughts of previous unpleasant experiences with anxiety are allowed. The phrase "*I'm not sick*" is designed to divert attention from the anxiety and reinforce the belief that there is no illness.

The phrase has two important functions:

It should remind you that there is no illness, which can calm the mind as anxiety symptoms are caused by body chemistry and not an actual medical condition.

It shifts the focus away from anxiety. Repeating "*I'm not sick*" avoids thoughts of anxiety as the brain can only focus on one thought at a time.

In the future, you should avoid using the word "anxiety", as using it only keeps you in an unnecessary and irrational anxiety spiral. It is therefore essential for your future well-being that you shift your mental focus from "I have anxiety" to "I'm not sick" from now on.

When it comes to treating anxiety, alternative methods can be used if the recognized treatment methods have not proven effective. Like medicine, this method does not require an understanding of complex concepts and theories to be applied.

A step-by-step guide is not necessarily required either. Just follow these three steps when starting the method: 1. make posters, 2. make small notes that you can carry with you, and 3. Repeat out loud to yourself many times a day "I am not sick." Live as you normally do. The method works in the background.

For this method to work optimally, it is recommended to avoid the use of the word **anxiety**. Phrases such as *I feel anxiety*, *I experience anxiety*, or *my anxiety* should be avoided as they can reinforce the perception of persistent anxiety. It is suggested to remove the word anxiety from one's vocabulary completely, as this will facilitate the process of reducing anxiety symptoms.

It is my hope, and it is significant to yourself, that you consider trying the method if none of the recognized anxiety treatments have been effective for you. I hope I have made it clear that experiencing irrational anxiety does not necessarily mean that you are suffering from a disease. If this is not the case, this chapter offers one last opportunity to get a first-hand experience of this.

Start your journey to freedom.

We recognize the current anxiety treatment methods and their pros and cons. Our method was developed because many people experience a lack of effect with existing methods (see [Appendix 1](#)). Our method also has its strengths and weaknesses.

By focusing on the fear of the fear, treatment is simplified. The treatment targets the common underlying fears in all anxiety types rather than specific anxiety types.

If you are already in treatment, please continue this as our method can be used simultaneously.

Saying to yourself *I'm not sick* or *I'm fine* having a psychological effect. The word sick activates emotions and can make thinking more negative. Saying *I'm sick* or *I have anxiety* makes it harder to think positively.

The statement "*I'm not sick*" can give a more pleasant feeling as it is a positive statement. This is due to psychological mechanisms, as certain words have a strong psychological impact. Both positive and negative words can have an impact. For example, the word "anxiety" can have a negative effect, which leads to it being avoided.

By repeating to yourself that you are not sick even though you are experiencing anxiety symptoms, you can change your focus. There will likely be symptoms at first, but over time the focus on the anxiety thoughts will diminish, which can lead to fewer symptoms.

This shift from a negative to a positive mindset is a natural reaction. However, it's not enough to just read about the method, you must actively try it out. The method is simple to start with compared to other cognitive methods.

Before you start using the method, it's important that you're ready to try it out. If you have any doubts, it's probably not the right solution for you right now. It's important to understand what the method does and why it works, otherwise it's useless.

This contrasts with medicines that we take without knowing their effects or content.

Let's get started.

Use some paper, A4 or larger, preferably some 60 x 80 cm canvas, acrylic paint in a color of your choice and a brush. These materials can be purchased in DIY stores. Pencil, ballpoint pen or markers can also be used. On the canvas or paper, write: "I am not sick" or "I am not sick, but thought challenged".

Say these phrases aloud as many times as possible every day. The more times a day, the better and the faster the result.

Hang the "I'm not sick" posters in your home and continue your daily activities. Jo

The more posters, the better. Read this book several times to understand the background of the method.

Stay at home for the first two weeks, if possible, to get used to the positive posters without the distraction of anxiety-provoking activities. Before you go out, the phrase "I'm not sick" should be firmly embedded in your consciousness.

After about two weeks, many will feel more comfortable going outside. It can be helpful to keep a note with this phrase handy when you go out so you can focus on it rather than the anxiety. If this doesn't help, try again after a week or two. Continue with this process until you feel more comfortable.

Whatever symptoms you experience, these posters can help reduce them and the thoughts that come with them. These posters are useful for anyone facing anxiety challenges.

Look carefully at the images below and repeat the text a few times. Now imagine you had these posters hanging in your home for a year. Would it decrease or increase your anxiety problems? Would it help at all? Consider these questions.



Living room poster



Bedroom poster



Bathroom poster.

My home has looked like this for years and it still does when I try out new methods. It's no different to the 1670s, when I was a kid and had posters of various rock bands in my room. I loved those posters and focused on them because they made me happy - just like my new posters make me happy.

Posters can help create a positive atmosphere in your home. They help to promote a sense of well-being. The method can therefore be useful not only for anxiety, but also for other minor mental health challenges such as depression and stress. Overall, it can contribute to a more positive everyday life.

How long does it take?

The duration to achieve anxiety freedom with this method varies from person to person. Some people can achieve results quickly, while others need extra support in the beginning or along the way. The most important thing is to start the method, as the beginning is often the most challenging part. This is because the method is new, and your mindset needs to change. In addition, there may be skepticism about the level of effectiveness. However, it is important not to give up.

The method aims to reduce thoughts about anxiety. It does not promise miracles or final solutions but offers an alternative approach that has proven to be very effective in minimizing future anxiety symptoms. You may still experience past anxiety triggers when you are away from home, but these will not have the same lasting effect when you return home as they did before.

The difference now will be that after such an episode, outside the home, you will be able to recognize that you are not sick when you see the posters in your home, stopping further concerns about the episode. Carrying an "I'm not sick" note with you can reduce acute anxiety attacks by focusing on the content of the note. Over time, the old anxiety notes will become less frequent because they are effectively stopped quickly.

The posters will help shift the focus from the negative to the positive, reduce the fear of anxiety attacks

and create a positive atmosphere at home. It can be challenging to say, "I have anxiety" when you constantly see posters that say, "I'm not sick."

It should be emphasized that this is not about whether you are sick or not, or whether you have anxiety or not. It's purely about saying the phrase "I'm not sick," regardless of how you feel.

To summarize: The method works because over time you "forget" to think about the anxiety because your focus is now constantly on something else, namely that you *are not sick*. When the thoughts of anxiety are no longer present, it diminishes. If the anxiety memory is not activated, it fades away.

Always remember that your memory contains your fear of experiencing more anxiety. It is therefore necessary to avoid triggering this memory by focusing on something other than its content. The phrase "I am not sick" will help you with this. Now all that's left is to try the method so you can experience its effects for yourself.

Let's start by getting your inner turmoil down with this little experiment. A voluntary experiment for those who are motivated.

I would ask you, as soon as possible, to start carrying a note in your hand with the text, **I am not sick.**

Always have the note in one hand, or as much as you can, whatever you do, if possible. It doesn't matter what you think about this idea right now.

As with many other challenges, you need to test any methods to find out if they influence the challenge.

If you can be persuaded to do what I'm asking you to do, you'll find that the anxiety quickly subsides for one simple reason. **That you shift your focus away from the anxiety to the note in your hand.** You simply can't help it. It can be hard to believe, so it must be tried.

I'm asking you to do this because I know it will help you, just as it has helped many others. If you think it doesn't work, just try it out.

I write it a little insistently because I find that too many people refuse to try it out. And that's a big mistake.

Resume.

Take some paper, it can be any kind of paper to start with. Write "I am not sick" on the paper. Hang it up in many places in your home. If it's in Post-it format, you can put them on mirrors, kitchen doors, bedside tables, refrigerators, TV screens, computer screens, the back of your phone and tablet. The more places the better. Repeat "I am not sick" to yourself as often as possible every day. This is the beginning.

When you have the money, find the nearest DIY store and buy some canvases, preferably 60 x 80 cm, some black acrylic paint and a brush. Paint "I'm not sick" on the canvases and hang them in strategic places in your home. Always have an "I'm not sick" note with the text "I'm not sick" when you leave your home. Always keep the note in your hand while you're out, even if it gets crumpled in your hand. Do not let it go.

Now you're well on your way to helping yourself.

A final help.

One problem I often experienced was the feeling of not being able to act on my symptoms in public spaces, resulting in persistent symptoms. Addressing anxiety is necessary. As you know, when you fail to act on symptoms, they intensify.

This often happened to me in different situations such as on the street, bus, train, supermarket and even at home.

That's why it's important to react when you notice the slightest signs of anxiety. Anxiety requires action, whether it occurs rationally or irrationally, at home or abroad. Acting reduces the feeling significantly in a natural way.

When I didn't do anything active, but remained standing or sitting, I let the symptoms overwhelm me, which led to further anxiety.

You don't have to be alone with your anxiety anymore.

One of the main reasons we repeatedly experience anxiety symptoms is our constant focus on the anxiety itself, due to the fear of further anxiety. This often happens because we don't know how to deal with it.

Therefore, from now on, it is recommended to always carry a note with you that says: I am not sick.

- For driving anxiety: Always place a note in the windshield of your car so it is visible.
- For social anxiety: Always have a note in hand when you're in social situations, whether you're giving a presentation or attending a party.
- For health anxiety: Always have a note in hand whenever possible.
- Panic anxiety. It is always recommended to keep a note handy whenever possible.

This note can help distract you from the symptoms of anxiety, regardless of the type of anxiety. Distraction is a universal technique that can be effective for everyone.

It is not necessary to believe the content of the note, the key point is that it helps to shift the focus away from incipient anxiety thoughts or symptoms. Some may see this as avoidance behavior, but on the contrary, over time this note helps you perform activities that you would otherwise avoid.

Possible challenges with the method

The method is designed to be simple and effective, but it's important to understand that changing deeply ingrained beliefs can take time and persistence. Here are some potential challenges you may face when

using the method and suggestions for dealing with them:

Relapse or unexpected reactions

It's not unusual to experience relapses even after making progress with the method. Sometimes old thought patterns can resurface, especially during stressful periods. Relapses are part of the process and do not mean that the method is ineffective.

Suggestion: Repeat the exercises, including self-conviction, and remind yourself of the principles of the method. Re-read the chapters on self-confidence and exposure to strengthen your understanding of the method.

Slow progress on deeply ingrained beliefs

Changing deeply ingrained beliefs can take longer for some people, especially if anxiety has been a part of their lives for many years. This can be experienced as a slow process.

Suggestion: Be patient and recognize that even small progress is important.

Difficulty avoiding negative labels

An important part of the method is to avoid using the word "anxiety" and instead focus on changing the language around the symptoms. Changing habitual expressions and thought patterns can be challenging, especially if they have been used for a long time.

Suggestion: Make gradual changes to your language and be aware of when you revert to old habits. Use reminders like posters or notes to remember to say, "I'm not sick" and avoid the word "anxiety".

Lack of motivation or feeling discouraged

It can be challenging to stay motivated, especially if the results are not immediately visible. Some days it can seem like the anxiety is particularly intense.

Advice: On days like this, it's helpful to remember the reason why you started this method. Re-read the chapters that inspired you and make a list of the small progress you have made. Any change, no matter the size, is a step forward.

Changing deeply ingrained beliefs takes time and patience, but it is possible. Although there may be challenges, they are part of the process of developing a new approach to life. By continuing to work with the method, you can gradually change your beliefs about illness and reduce irrational anxiety.

Thought experiment

What do you think would happen if people stopped using the word anxiety and stopped referring to themselves as, *I have anxiety*, or *you have anxiety?* or *my anxiety*. I stopped it overnight as best I could. Already a week later I noticed a difference in my thoughts. I started to quietly let the anxiety thoughts pass without commenting or thinking about them, as I had always done. *That damn anxiety, damn anxiety, etc.*

But when anxiety is a big part of your life, you need a reminder of this decision, otherwise you forget about it when your mind is racing. That's why I used my little notes here too. I had simply written, *don't remember a word about anxiety in case of symptoms*. I had the notes lying on every table in my home. I combined the notes for when I was going out. I had written *I'm not sick, not a word about anxiety*.

Of course, anxiety thoughts cannot be avoided, but there is no need to reinforce them by commenting on it.

Over a short period of time, I stopped using the word anxiety completely and used the word challenge instead. *My anxiety* became *my challenge*. *I am anxiety* became *I am challenged* etc.

If you can avoid writing and talking about anxiety, it will make a big positive difference to your life.

Chapter 28: Ask for help. People want to.

Gaining useful information and knowledge from this book is one thing. Putting this knowledge into practice to manage anxiety is another. To do this, you need to start thinking differently. This can be challenging because anxiety is deeply ingrained. How do you avoid believing in anxiety when it is constantly present? The purpose of this book is to help you apply information, knowledge and methods to manage anxiety. It is important to find the will, courage and belief that it is possible to become anxiety-free.

Many people may find that they don't have the same willpower as the author and may give up along the way. Information and knowledge can therefore prove insufficient if the willpower is lacking. A useful tip is to involve a girlfriend, partner, friend or acquaintance in the process of implementing the techniques and methods described. Most people are willing to help, even if they don't necessarily understand all the details. Empathy is a valuable quality that enables us to understand and feel the emotions of others. Humans have more facial muscles than any other animal, making it possible to express emotions with our facial expressions.

Consider helping others. Ask yourself: Would I ignore a friend who needed help? It's likely that your friend wouldn't ignore you if you asked for help either. It's important not to be afraid to ask for help as people are willing to help.

Isolating yourself at home with anxiety without doing anything can be unhelpful. You may find yourself suffering from anxiety, isolated with it, and find it challenging to go out. This is why it can be important to get help.

Sometimes it's necessary to try new methods when the familiar ones aren't working. Waiting passively can lead to stagnation. Experience shows that different strategies may be necessary.

It is not only the methods described that can help overcome anxiety, but also one's own motivation and willingness to work towards becoming anxiety-free. This requires active effort.

The only thing left to do now is to try out our method if you haven't already started. Of course, I hope you are, by continuing to hold the note in your hand as described at the beginning of the book. If this is not the case, please take out the note again now.

Many will probably want to discuss our method scientifically, including seeing evidence, numbers, etc. However, there is no scientific evidence to present, as the method is based on our rational thinking around an irrational challenge and our beliefs.

Part 5: Conclusion

Chapter 29: The Road to Anxiety Freedom - Documented Effect of the Method

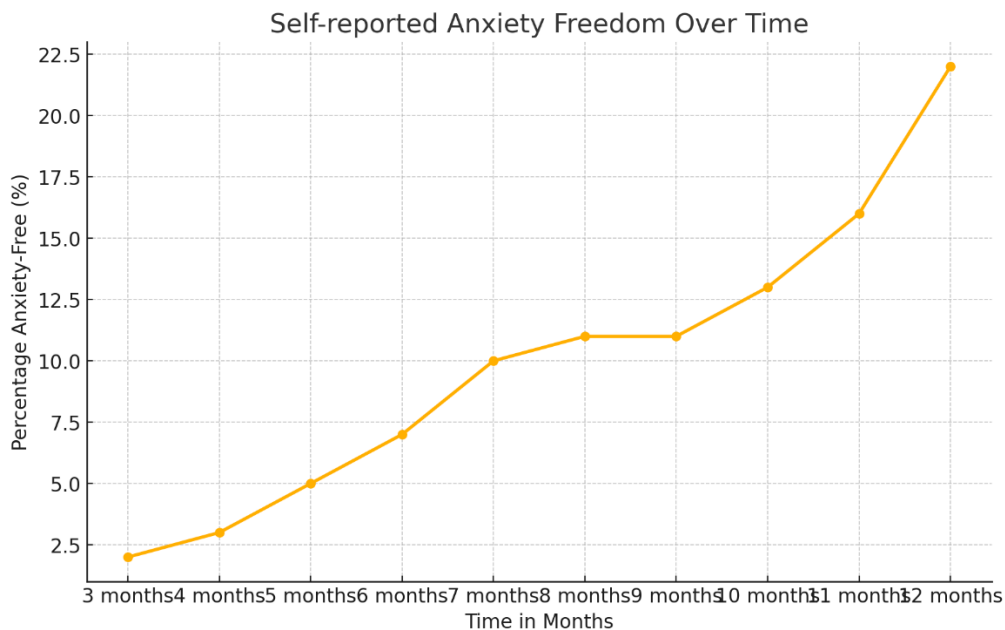
Privately collected method data.

Unfortunately, it has not been possible to find professional partners to help or collaborate in the testing of the method. This is probably due to the absence of medication and known cognitive treatments in the method. Generation-anxiety has therefore conducted a private test itself to document the method. Thus, the results cannot be described as scientific, but we allow ourselves to refer to the test as evidence-based, a term often used in connection with anxiety testing or studies.

Test procedure for the collection of private method data.

The test participants were primarily from the US, Mexico and Brazil and were recruited through some of Facebook's largest US anxiety groups with millions of members. Participants were found through both regular and paid posts in these groups and through Facebook feeds over a period of two years. All participants were gathered in a Facebook chat group where the material was available for download. It was a requirement that no discussion of medication or negative talk about anxiety was allowed in the chat. Only a positive tone was allowed as the focus was to shift to a positive mindset instead of the perpetual negative.

A Google form questionnaire measured results after 3 months, 6 months and 1 year. The material was downloaded about 10,000 times, and about 4,500 responded, which I have since learned is well above average for feedback on such tests. Of these, about 65% described themselves as anxiety-free after 1 year, many already after a few months to 6 months.



The chart is based on 4,275 responses. 1% corresponds to approximately 43 people.

The figures are of course with all the reservations that must be taken when we talk about self-reporting. Participation and the material were free of charge. Generation-anxiety.com covered all the costs of developing the material, the questionnaire, hosting the questionnaire, etc. The 5% of participants who did not become anxiety-free cited their beliefs about anxiety as a disease and therefore did not believe in the method without having tried it. This may indicate the influence of anxiety.

Concluding remarks on the effectiveness of the method

As described in the book, anxiety can be a major challenge, especially when traditional methods such as medication and therapy do not lead to the desired results. This method of anxiety management has been developed as a simple tool that offers a new approach to achieving anxiety freedom through strengthening positive beliefs and focusing on personal empowerment.

Unlike many other methods where anxiety often returns for patients, this method shows a relapse rate of less than 10%. The simplicity of the method is one of its biggest advantages. It requires no specialized equipment, expensive sessions or medication - just dedication to daily repetition of positive statements and the willingness to change old anxiety-rooted beliefs. This practical approach makes the method both affordable and easy to integrate into everyday life.

With its measurable results, the method challenges traditional perspectives on anxiety treatment and opens new ways of looking at treatment. While the method does not necessarily replace all treatment, it provides an alternative for those seeking a method beyond symptom control.

This approach can be useful in situations where many do not experience improvement with existing treatment methods. The method's results indicate that positive change is possible even when traditional treatments have not been effective.

In conclusion, the method requires dedication and openness. While it is not a miracle cure, data shows that investing time and effort can lead to significant improvements.

"If the method can help reduce anxiety, it might be worth considering"

This statement has had an impact on many former users and can be seen as a possible step towards a life with less anxiety.

The method's data clearly shows that anxiety does not necessarily have to be a permanent condition. It offers a hopeful path for those who are open to trying new solutions. This should be seen as an encouragement to continue working towards freedom from anxiety, remembering that your consciousness is shaped by the beliefs you choose to hold.

I realize that I've highlighted this method repeatedly, and that's due to my understanding of the challenges that may be involved in convincing you to try it.

Chapter 30: Conclusion

Now that we've gone through the book and I've demonstrated how you can focus on not being sick, even if you feel sick in the moment, we can consider which model of anxiety you subscribe to. You can either view anxiety as a mental disorder that is treated with medication or extensive therapy, or you can adopt the descriptive theory of the role of memory in persistent anxiety, where past anxiety experiences trigger repetitive thoughts about them.

I have shown you a different understanding of anxiety and that there can be another way out of anxiety if you embrace it.

The most important thing now is to focus on not being sick instead of being sick. You will feel much more confident in everyday life if you can say *I'm not sick*.

In this book, we have examined the traditional view of anxiety as a disease. We have found that:

Irrational anxiety can be seen as a chemical reaction maintained by memory.

Irrational anxiety can occur when the body reacts to memories of past unpleasant experiences.

It's not necessarily the symptoms that are the problem, but rather the belief that these symptoms mean you are sick.

Instead of focusing on symptom management or complex therapies, this method works to change the core beliefs about anxiety. By rewriting the negative beliefs and memory traces that perpetuate anxiety, you can learn to manage it better.

Through simple self-awareness, non-reactive exposure and avoiding negative labels, you can begin to change fixed beliefs about anxiety as a disease and improve your condition.

It is now possible to take the next step. With the new knowledge and tools that have been presented, you

can work to change your perception of anxiety and reduce the limitations that irrational anxiety causes. You can start today with simple exercises and observe any changes in your thoughts.

No one experiences anxiety permanently. The opportunity to reduce anxiety is within reach by challenging anxiety-related beliefs through rational thinking.

As a society, we should not ignore the problem of the known assumptions of irrational anxiety as it affects many people. It is therefore crucial that we open ourselves up to other theories and options when the currently recognized methods are proven not to have the desired effect for approximately 80% of those who try these treatments (see [Appendix 1](#)). We shouldn't be satisfied with treatments that only show an effect for around 20-50% as this leaves far too many in despair. The treatment of irrational anxiety, if it is to be treated, should thus be rethought by a broad group of people, professional and non-professional, to create an open dialog and test different options. Both scientific and more rational methods.

Many would argue that if it was so easy to become anxiety-free with the method shown, by simply saying **I'm not sick and hanging up posters**, wouldn't everyone be anxiety-free? Statistics show that the majority of those who try the method are likely to achieve results. However, the problem is that few try it because we are constantly told that anxiety is a condition that requires medical treatment etc. People find it difficult to break out of the anxiety pattern because we have been taught for many years that anxiety is a disease. For many, it makes sense that anxiety can be labeled as a disease because it feels so uncomfortable. The problem is that this assumption of illness often keeps us stuck in anxiety instead of helping us to let it go.

We humans are better off getting a diagnosis for our challenges that explains what we assume are the causes, as it's easier to accept than to explore the possibility that there might be another, more rational explanation for the anxiety.

I really hope you can bring yourself to try the method.

You are more than welcome to reject the method once you have tried it for just three months, which is the minimum to measure an effect.

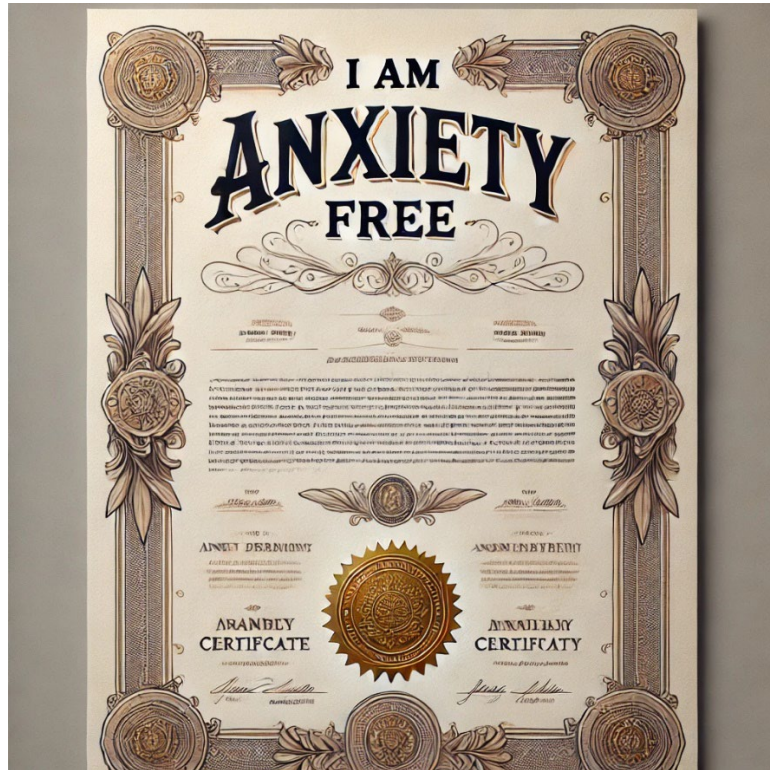
Feel free to write to me with your thoughts and suggestions.

Diploma: I am anxiety free

Becoming anxiety-free boosts your self-esteem and confidence. I wanted to make sure I stayed anxiety-free, so I hung up a certificate to prove it. Every time I saw the diploma; it reminded me of my victory. The diploma made me proud.

The day you can tell yourself that you don't fear anxiety anymore. That you are not afraid of new symptoms. That you don't think about anxiety. The day you are anxiety free.

Here's your diploma for the day you feel ready and consider yourself anxiety-free. Print it out, hang it up, and let it remind you of your anxiety freedom. Take it seriously - it's a great support. Also consider hanging it alongside *the I'm Not Sick posters* for additional psychological support. Wouldn't we all like to be able to say: I am anxiety free? To family, friends but most importantly to ourselves.



Welcome to your new anxiety-free life.

Be patient with yourself: Anxiety is a complex experience, and it can take time to make lasting changes. Recognize your efforts and the progress that is being made.

The insights this book offers are only valuable if they are put into action. Understanding anxiety alone is not enough - it requires actively working with the tools and techniques described.

Extra: Driving anxiety

Driving anxiety is included as a topic because it is often asked about. This type of anxiety is like other types of anxiety and typically arises from previous unpleasant experiences with driving. The problem lies not in the car itself, but in the thoughts, people associate with it.

The anxiety is similar, but the object is different, in this case the car. The thought of driving can cause anxiety and avoidance. This can become a problem because there is no way to escape if you experience symptoms while driving. Anxiety requires action, either fight or flight, which is difficult to perform in a closed situation like inside a car. This can trigger fear and worsen symptoms.

Many people can ignore these symptoms, but those who react with panic often develop problems down the road as they start to associate the car or driving with unpleasant symptoms. To manage this, you need to learn to separate anxiety from places or situations.

These associations are stored in memory.

In driving anxiety, the feeling is not connected to the car, but inside the person. The anxiety follows the person and not the car or situation. The inability to escape from the car can trigger the symptoms. The question is, what can you do if you experience symptoms while driving?

Here's what I did after 35 years of driving anxiety.

The text is based on what helped me. Therefore, it may not work for everyone. It took about 2 months to completely get rid of driving anxiety with daily driving.

At the slightest sign of symptoms, the car is stopped until the symptoms subside. This also applies on the highway where the emergency lane is wide enough. When driving over bridges, focus on the license plate of the car in front. On all other roads, simply pull over, whether in urban areas or not. It's important to give yourself permission to stop regardless of location.

Get out of the car and jump on the spot to reduce the chemicals in your body that have triggered the symptoms. Stay in the emergency lane or roadside for a while, sit back in the car and wait until you feel calm.

This is important to increase tolerance to the symptoms. Therefore, you should stay in the car to understand that the fear is not connected to the car but comes from within. The car is not dangerous, it is the thoughts that create the fear due to past experiences. The car itself is harmless.

It's important to understand that your symptoms are due to body chemistry and not illness. A simple reminder in the car can be helpful. Write a note with a reassuring text like: *"Pull over if you feel symptoms. Remember, it's just body chemistry, not illness."* Place the note in the windshield of your car so you don't forget it. Make sure the note is visible or hold it in your hand so you can see it while driving.

Keep a note with the text in your hand as you walk to your car. It's important to be aware that you can pull over if you experience symptoms. A good exercise is to go for a short drive, stopping a few times and getting out of the car. Look around for a minute or two. Get back in the car and sit there for a few minutes without doing anything. No music. Get your body used to nothing happening when you're in the car. If it gets uncomfortable, just get back out and wait a bit.

If it seems overwhelming, you can start by getting in the car without driving. Sit in the car for a while, get out and get back in. Walk around the car and spend time with it. Touch the car and feel its presence to understand that it's not the car that's dangerous.

Once you feel comfortable with short drives, you can gradually extend the route and do the same again. Continue this process systematically.

Many people experience nervousness at the thought of driving, which is why it's essential to get familiar with the car. It's unfortunate to start a drive with nervousness or tension, as driving should be a pleasure. Therefore, it's important to stay calm before you start driving.

Calm start: Before you start your drive, it is recommended that you get comfortable in the car and give yourself time to relax. A calm start reduces the risk of anxiety-related symptoms occurring. Wait 1-2 minutes before you start driving.

I hope these tips will be useful to you. Driving anxiety is a challenge, but it can be overcome through training. The key is to break the connection between the car and the discomfort by gradual exposure as described.

This strategy can be used in many cases of anxiety. The strategy just needs to be adapted to the specific situation. Please contact me if you need guidance in a specific situation.

Next is personal experience.

A final trick is to smile. That is, smile artificially. Try smiling now. Can you feel the difference?

While smiling, can't you also experience anxiety symptoms or seizures, this is physiologically impossible as smiling releases small amounts of dopamine. Yes, just test it. The same goes for when you laugh. That's why it's a good idea to watch a comedy that makes you laugh during the day.

Next time you get in your car, try smiling for as long as you can. You'll experience a completely different driving experience.

Of course, a smile cannot stop an anxiety attack, as that would be fatal. Adrenaline will always override dopamine etc. But it can stop anxiety symptoms from occurring. It's virtually impossible to think negatively while smiling, as smiling signals joy.

If you can remind yourself to smile when you experience anxiety symptoms, it will significantly reduce the symptoms in a very short time. However, it's difficult as the anxiety symptoms are all-consuming. But you can prepare by writing little notes to yourself with the text, *remember to smile at the slightest symptoms of anxiety* and always keep the note close to you.

If you are interested in exploring the smile more, please contact me as there is much more to the smile in anxiety treatment than described here. I have, in other resources that can be sent to you, described how you can smile for several hours and thus do many of the normal anxiety provoking things without symptoms such as shopping or leaving your home for long periods of time. In my own process towards anxiety freedom, I introduced the smile as part of my daily activity, along with the other descriptive techniques, by doing things I normally "couldn't" do. The smile is a powerful but overlooked technique in anxiety treatment.

This concludes the book.

If you experience specific challenges such as driving anxiety, shopping anxiety, or anxiety when using public transportation such as bus or train, feel free to contact us. We can develop a plan to help you overcome these challenges. This offer applies to all types of anxiety issues.

Visit or contact us at [Generation Angst](#) or contact me directly at account.dk@gmail.com if you have any questions about what you have read or any other questions.

I hope you will participate in making this anxiety book even better.

Go to [Give feedback](#) and share your opinion. It's just a few questions. You do it completely anonymously.

Thank you for reading along.

Thomas Fogh Vinter

Appendix

Appendix 1. Cure rates for the different anxiety treatments

This appendix contains a table showing the cure rates for various anxiety treatments and the percentage of anxiety sufferers receiving these treatments. The table below shows data from the Anxiety and Depression Association of America (ADAA). It is for the United States.

Treatment type	Cure rate	Percentage of anxiety sufferers receiving treatment
Cognitive behavioral therapy (CBT)	50-75%	10-20%
Medication	40-60%	30-40%
Exposure therapy	60-60%	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: Different 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 proportion of those seeking treatment. Medication, particularly 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 medication (SSRIs) for anxiety, **the Number Needed to Treat (NNT)** is an important tool. It helps us understand how many people need to be treated for one to make a noticeable improvement.

What is the NNT for anxiety treatments?

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

- **MCT:** Like CBT, MCT has an NNT of approximately 5, making it just as "effective" as treatment.
- **SSRIs:** Medications like SSRIs have an NNT of approximately 7, meaning that for every 7 people treated, one will experience a significant improvement.

What does this mean in practice?

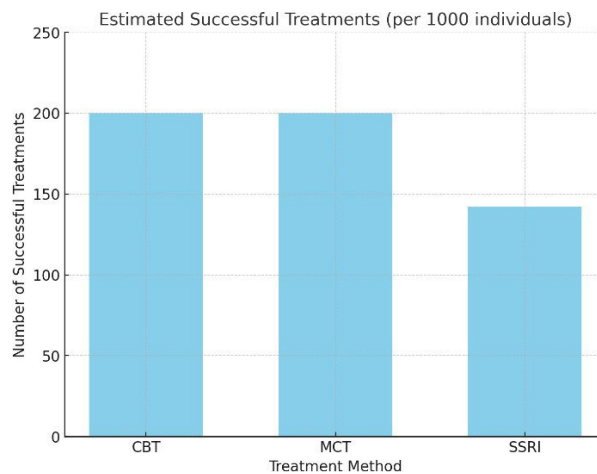
For every **1000** people treated:

- CBT and MCT will help approximately **200 people** make significant improvements.
- SSRIs will help approximately **142 people**.

While therapies may seem slightly more effective than medication, the choice can depend on individual needs, preferences and side effects. For example, medication may 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 helps patients and practitioners make informed choices, assessing 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 very difficult to see how 20% or less effect can be an effective treatment. Where do the 80% who do not experience an effect go afterwards? What options do they have?

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

National Institute for Health and Care Excellence (NICE)

Guidelines on the treatment of anxiety disorders, including NNT for different 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](#)

Danish Health Authority (Denmark)

National clinical guidelines for the treatment of anxiety disorders in adults [National clinical guidelines](#)

PubMed

Search engine 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 drug treatments for generalized anxiety disorder (NNT for SSRIs). Article: "Efficacy of drug treatments for generalized anxiety disorder: systematic review and meta-analysis."

[Link to article on PubMed](#)

Wells A et al (2015)

Study on the effectiveness of MCT in anxiety disorders.

Article: "Metacognitive Therapy for Anxiety and Depression: A Review of Current Empirical Findings."

[Link to article on ResearchGate](#)

These sources provide a solid starting point to further explore NNT and the effectiveness of treatment methods.

As you can see, there is much to be desired from the recognized treatments if they are to make a real difference. One wonders how you can call such high NNT numbers evidence. If the evidence shows an effect of 20%, the evidence must also show a lack of effect of 80%, which is the number we should focus on to bring it down.

We would like to see more focus and effort put into helping all those who **do not** benefit from the recognized treatments and those who are left behind on years of medical symptom management.

These NNT numbers also show that the scientific validity bar is very low for what qualifies as evidence.

Perhaps most importantly, think about why the evidence is so low for anxiety treatment.

Appendix 2. Method treatment plan

The method does not have an actual treatment plan as there is nothing to treat, but something to change. It's about changing misinterpretations about anxiety and not curing a disease. The method creates a life shift from negative anxiety to a positive life.

We have a plan in place to help you:

The anxiety treatment program with our method works for those who are ready to challenge their beliefs about anxiety. The method is based on logic and rational thinking rather than science.

Anxiety is seen as a problem that stems from the fear of more anxiety after the first experiences that are stored in memory.

The biggest obstacle is a lack of belief in the simplicity of the method. The method is about consistency and believing that you can change your perceptions of anxiety.

Why does the method work?

The method helps take the focus off anxiety-related thoughts and symptoms, reducing the appearance of anxiety symptoms. This approach is applicable for all individuals with anxiety.

Goal: To live without irrational anxiety. The course is designed to be easy to understand for all age groups, including children and adolescents.

Introduction to the Method

This method focuses on changing negative beliefs created by anxiety experiences in memory. It involves the use of positive statements and visual reminders to shift the focus away from persistent negative thoughts that a person with anxiety may experience. The aim is to reduce and gradually eliminate these negative thoughts as the memory of the anxiety is diminished because it is no longer activated. As a result, there will be no anxiety-related memories to trigger new anxiety perceptions.

Phase 1: Understanding anxiety

Explanation of the first experience of anxiety: The first experience of anxiety can occur for several reasons

causes such as stress, genetic factors or specific incidents.

Subsequent anxiety: The anxiety that follows the first episode is often caused by the fear of experiencing further anxiety. This persistent anxiety is the primary problem with all forms of anxiety. This type of anxiety can be reduced by changing our perception of what anxiety is and reshaping the memory that contains memories of the discomfort of anxiety.

Avoid the thought "I have anxiety": Expressing "I have anxiety" or "my anxiety" can lead to an increased focus on the anxiety, making the process of overcoming it more difficult.

Phase 2: Preparation

Create posters with positive statements:

Create posters with messages like "I'm not sick" and place them strategically around the home. These

posters can be hung in frequently seen places such as the fridge, kitchen doors, by mirrors, in the living room and above the bed. Wherever you spend the most time.

In addition, write this sentence on small notes and place them in carefully selected places in your home, such as tables and cabinets, and near the areas where you spend the most time. Also, set background images on your devices (cell phones, tablets, etc.) with this text.

Repeat the statement out loud:

Recite the phrase "I am not sick" out loud at least 20 times a day. The repeated utterance will help to reinforce this belief in your consciousness.

Phase 3: Treatment Establish a daily routine:

Repeat the affirmations "I am not sick" every morning, every evening and throughout the day when you see visual reminders. The aim is for this affirmation to become automatic when you experience symptoms of anxiety.

Daily exposure:

After a few weeks, gradual exposure to minor situations that have previously triggered anxiety can begin. This may include activities such as a short walk or performing tasks that have been avoided due to anxiety. Every time symptoms occur, the phrase "I am not sick" should be repeated to yourself. It is also recommended to keep a note with the text *I am not sick* with you when you are out and about.

Phase 4: Targeted Confrontation Gradual Exposure:

When you feel ready, you can start gradually exposing yourself to the situations that provoke anxiety while reminding yourself that you are not sick. Start with smaller challenges and increase the difficulty progressively. Always bring your reminder slip with you when you go out.

Change focus:

If anxiety-inducing thoughts arise, consciously focus on positive statements such as "I'm not sick, I'm just facing a challenge."

Phase 5: Maintenance and Closure Maintain positive beliefs:

As you experience progress, it is important to continue using positive statements daily, even in the absence of anxiety. It is still recommended to refrain from mentioning the anxiety.

Evaluate your progress:

Observe the smaller improvements, like the ability to perform previously anxiety-provoking activities without feeling anxious. Recognize and reward yourself for the progress you make and remember that it takes time to change an ingrained belief about anxiety disorder.

Gradually remove the posters:

Once you've been anxiety-free for a longer period, preferably over a year, you can start removing the posters gradually. However, many people choose to keep them as a reminder of their development and progress.

Rounding off

The method focuses on changing beliefs, memories and habits around anxiety, including negative self-talk. By using this technique, anxiety can be reduced or eliminated by understanding it as something that stems from memory and learned responses, rather than as a disease.

Example of a 30-day plan.

This plan will help you integrate the methods into your everyday life.

Week 1: Focus on knowledge and understanding

- Read the chapter on the mechanisms of anxiety.
- Start with daily repetitions of the phrase "**I am not sick.**" Morning, noon and night. When you get up and go to bed.

Week 2: Small exposures

- Choose a simple situation from a possible triggers list, for example a short trip out.
- Keep your reminder ("I'm not sick") with you.
- After each exposure, write down how it went.

Week 3: Expand your exposure

- Challenge yourself to stay in situations longer.

Use your reminder actively along the way, for example: "I'm not sick. Anxiety is just chemistry."

Week 4: Consolidation and reflection

- Look back on your progress.
- Repeat exposures and exercises that still feel difficult. Use your reminder actively when you're out and about.
- Write down at least one thing you've learned about yourself and anxiety.

Good luck to you.

Glossary of terms

- **Adrenaline:** A hormone released in the body during stress and fear that prepares the body on the "fight or flight" response.
- **Amygdala:** Area of the brain that processes fear and emotions.
- **Anxiety attack:** An intense experience of fear and discomfort, often accompanied by physical symptoms.
- **Fear of the anxiety:** Fear of experiencing another anxiety attack or symptoms.
- **Anxiety symptoms:** Physical and psychological reactions that can accompany anxiety, such as palpitations, dizziness, nausea, and shortness of breath.

- **Agoraphobia:** Fear of open spaces and situations where it can be difficult to escape.
- **Misinterpretation:** Misinterpreting the body's signals and giving them an incorrect meaning, e.g. interpreting palpitations as a sign of a heart defect.
- **Memories:** Memories of past anxiety experiences that can trigger new anxiety attacks.
- **Irrational anxiety:** Anxiety that is not based on a real threat.
- **Negative automatic thoughts (NAT):** Unconscious, negative thoughts that can exacerbate anxiety.
- **Conviction:** A firm belief in something that may be based on facts or feelings.
- **Survival emotions:** Emotions that have evolved to help us survive, such as fear, anxiety, and anger.
- **Symptom management:** Treatment that focuses on alleviating the symptoms of a disease without treating the underlying cause.
- **Obsessive compulsive disorder:** An unwanted and repetitive thought that causes anxiety and discomfort.
- **Avoidance behavior:** Avoiding situations that can trigger anxiety.

Quiz with answer key

Question:

1. What is the role of adrenaline in anxiety?
2. Briefly describe the process that leads to an anxiety attack, according to the sources.
3. What is "fear of fear" and how can it affect a person?
4. How does irrational anxiety differ from real anxiety?
5. What role do ancient monuments play in relation to anxiety?
6. What is Agoraphobia and how can it manifest in everyday life?
7. According to the book, how can you change your beliefs about anxiety?

Answer key:

1. Adrenaline is a hormone that prepares the body for the "fight or flight" response. In anxiety, adrenaline is released, which can lead to physical symptoms such as palpitations, dizziness, and shortness of breath.
2. The process typically starts with a thought or worry that activates negative emotions. These feelings are amplified by the body's reactions (symptoms) and the process escalates in a vicious cycle until it culminates in an anxiety attack.
3. "Fear of the fear" is the fear of experiencing another anxiety attack. It can lead to avoidance behavior and limit a person's life.
4. Irrational anxiety is not based on a real threat, while real anxiety is a natural reaction to a dangerous situation.
5. Memories of previous anxiety attacks can trigger new anxiety attacks by activating negative emotions and bodily reactions.
6. Agoraphobia is fear of open spaces and situations where it can be difficult to escape. This can lead to avoiding leaving home or limiting activities.
7. The book suggests that you can change your beliefs about anxiety by confronting negative thoughts, focusing on positive beliefs, and changing your behavior around anxiety.

Sources:

Relevant links to research in anxiety, memory and neuroscience:

1. [Joseph LeDoux's research on anxiety and the amygdala](#)
2. [The effect of stress on memory and behavior - Jelena Radulovic](#)
3. [Neuroscience Psychology at Aarhus University](#)
4. [National Institute of Mental Health \(NIMH\) - Anxiety research](#)
5. [The Brain and Behavior Research Foundation - Anxiety research](#)
6. [Journal of Cognitive Neuroscience - Articles on memory and anxiety](#)