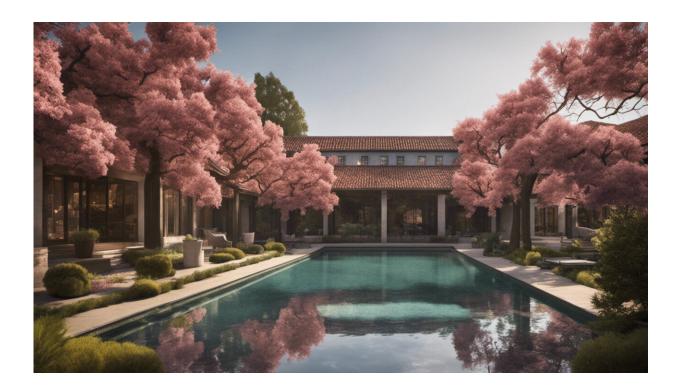


## **Research helps people with social phobia face their fears**

September 5 2013, by Brooke Donald



Credit: AI-generated image (disclaimer)

(Medical Xpress)—Social anxiety disorder – which can include being afraid of speaking in public, fear of interacting with people, and intense nervousness at being the center of attention – affects millions of people each year.



Those living with it suffer from distorted thinking, including false beliefs about social situations and the negative opinions of others. They feel judged, embarrassed and criticized. The disorder can interfere with school, work, activities and relationships.

A team of <u>research scientists</u> at Stanford's Clinically Applied Affective Neuroscience project at the Department of Psychology has been studying treatment options, using functional <u>magnetic resonance imaging</u> and clinical interventions to examine the factors that cause and maintain <u>emotional balance</u> and imbalance.

A new study from the lab looked at one of the most popular non-drug methods to treat <u>social anxiety</u> disorder – <u>cognitive behavioral therapy</u> – to see what changes happen in the brain after a person receives this remedy.

Through a series of experiments, the researchers found that the therapy, a kind of mental health counseling that helps people learn to respond more skillfully to <u>negative emotions</u>, indeed was effective in significantly reducing symptoms of social anxiety disorder.

Further, they found that the therapy increased <u>brain activity</u> in areas associated with emotion regulation.

## Why does it work?

Philippe Goldin, one of the main researchers, said that understanding how the brain responds to and changes with the therapy can help elucidate how and why cognitive behavioral therapy works.

With that knowledge, Goldin said, future studies could investigate how different forms of the therapy – for example, group therapy versus individual therapy – influence the dynamics of brain networks involved



in emotion regulation strategies.

In the study, published this month online in the journal *JAMA Psychiatry*, patients diagnosed with social anxiety disorder underwent 16 psychotherapy sessions over four months, during which they were trained to change the way they deal with certain negative emotions.

This training in "cognitive reappraisal or restructuring" allows a person to revisit his or her emotional response to a situation and change the reaction.

For example, Goldin said, imagine a person who fails a series of tests. He first thinks negatively about his performance. But once he reframes his response, he can later view the results as a way to challenge and better himself.

Another example, described in the study, would be someone thinking, "No one likes me." A way of reframing that thinking may be to tell oneself, "That's not always true," "Some people like me," or "This is only a thought, not a fact."

Prior neuroimaging studies have found that patients with social anxiety disorder show delays in regions of the brain associated with <u>emotion</u> regulation and abnormalities in neural circuitry there, compared with healthy people.

But those studies left questions about whether clinical interventions like psychotherapy could affect how the brain responds.

## **Reactions in the brain**

For this study, patients were scanned using fMRI to investigate brain responses when reacting to and reframing negative-self-beliefs. During



the scan, patients read autobiographical social situations with situationspecific beliefs embedded in the story that were used to probe reactivity and reappraisal.

After each negative self-belief came up, patients rated how they felt.

Goldin said the study further reveals that counseling is effective in changing the behavior of the brain, helping people respond to and reframe negative emotions more quickly.

The effectiveness of cognitive behavioral therapy gives hope to many of the sufferers of <u>social anxiety disorder</u> that there is a treatment that can last and endure without drugs.

Provided by Stanford University

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