

The Role of Digital Health Literacy in Mitigating Cyberchondria: A Review of Intervention Strategies

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ABSTRACT

Cyberchondria, a phenomenon characterized by excessive internet searches for health-related information, has become increasingly prevalent in the digital age. This compulsive behaviour often leads to heightened anxiety and unnecessary medical consultation, placing an additional burden on healthcare system. This review explores the role of Digital Health Literacy in mitigating Cyberchondria across different populations examining key psychological social, and technological factors that contribute to its development. Studies indicate that cyberchondria is widespread, with variations observed based on demographics such as age, gender, and educational background. Individuals with pre-existing health anxiety, cognitive biases, or easy access to unreliable online medical information are particularly vulnerable. The consequences of cyberchondria range from increased stress and misinterpretation of symptoms to diminished trust in healthcare professionals and overutilization of medical resources. To mitigate the negative effects of cyberchondria, interventions such as cognitive-behavioural therapy, digital health literacy program, and responsible online health communication are essential. Additionally, regulatory measures aimed at improving the accuracy of digital health content could help individuals make more informed decisions about their well-being. Future research should focus on developing standardized assessment tools and exploring long-term trends in cyberchondria across different cultural and technological contexts. By fostering awareness and promoting responsible health information-seeking behaviour, the adverse effects of cyberchondria can be reduced, leading to better mental health outcomes and a more efficient healthcare system.

Keywords: Cyberchondria, Digital Health, Health anxiety, PCOS, Healthcare, Mental Health

INTRODUCTION

Cyberchondria is a term used to describe the compulsive and excessive online searching of health-related information, which often results in heightened health anxiety rather than reassurance. It is closely associated with health anxiety and hypochondria but is specifically triggered by digital sources of medical information. Unlike general health information-seeking behaviour, cyberchondria involves repetitive, distress-inducing searches that escalate anxiety and lead to a cycle of continuous checking (Starcevic *et al.*, 2020). The conceptualization of cyberchondria is rooted in cognitive and behavioural models, highlighting the interplay between

anxiety sensitivity, uncertainty intolerance, and the availability of online medical information. Individuals prone to health-related anxiety tend to misinterpret ambiguous health content found online, reinforcing their fears rather than alleviating them (Mcmullan *et al.*, 2019). Moreover, digital platforms, including search engines and social media, often present worst-case scenarios or unverified medical content, further intensifying distress (Vismara *et al.*, 2020).

Cyberchondria differs from traditional hypochondriasis as it is driven by the accessibility of digital information. Instead of frequent visits to healthcare providers, individuals affected by cyberchondria excessively rely on internet searches, which paradoxically

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increase uncertainty and worry. This growing concern in the digital health landscape underscores the need for awareness, interventions, and regulation of online medical information to mitigate its impact (Vismara *et al.*, 2020).

Historical background of the term cyberchondria:

The concept of cyberchondria has its roots in the increasing reliance on digital health information, particularly with the advent of widespread internet access in the late 20th and early 21st centuries. The term itself is a combination of “cyber,” referring in the digital space, and “hypochondria,” a psychological condition characterized by excessive health-related anxiety. Early discussions on cyberchondria emerged in the early 2000s as internet users began frequently searching for health information, often leading to unnecessary distress and misinterpretation of symptoms (Starcevic *et al.*, 2020). The term “cyberchondria” was popularized in media and academic discourse as researchers observed a pattern where individuals, rather than finding reassurance, experienced heightened anxiety following online symptom searches (Pawar *et al.*, 2022). Early studies on the phenomenon highlighted that while the internet offered unprecedented access to medical knowledge, it also facilitated compulsive checking behaviours, reinforcing anxiety and contributing to excessive worry about one’s health (Jokic-Begic *et al.*, 2020). Overtime, cyberchondria has been distinguished from general health-related internet use by its compulsive nature and its paradoxical impact-exacerbating rather than alleviating concerns. Researchers have linked it to cognitive biases, such as confirmation bias and catastrophic thinking, as well as broader issues in digital health literacy (Starcevic *et al.*, 2020). The increasing prevalence of cyberchondria underscores the need for strategies to manage digital health anxiety and promote responsible health information-seeking behaviours (Jokic-Begic *et al.*, 2020).

Concept of Digital Health Literacy:

Digital Health Literacy also known as eHealth literacy, refers to an individual’s ability to seek, find, understand and appraise health information from electronic sources and apply this knowledge to address or solve health-related issues. This multifaceted concept encompasses several competencies, including traditional literacy, health literacy, information literacy, media literacy and computer literacy (Ban *et al.*, 2024). Collectively, these skills enable individuals to effectively navigate digital health resources

and make informed decisions regarding their health. The importance of DHL has grown in tandem with the increasing reliance on digital platforms for health information. As digital technologies offer greater opportunities for health management, prevention, and promotion, possessing robust digital health literacy becomes essential for individuals to benefit fully from these resources (Mayukh, 2024). In context of cyberchondria- a condition characterized by excessive online health-related searches leading to increased health anxiety- DHL plays a critical role. Individuals with higher levels of DHL are better equipped to critically evaluate online health information, potentially mitigating the distress associated with cyberchondria (Ban *et al.*, 2024).

The relationship between Digital Health Literacy and Cyberchondria:

Research indicated a complex and multifaceted relationship between DHL and cyberchondria. Some studies suggest that higher level of DHL may protect against cyberchondria by enabling individuals to critically evaluate online health information, thereby reducing unnecessary anxiety. For instance, a study among university students found that those with higher eHealth literacy were better equipped to assess online health information, potentially mitigating the development of cyberchondria (Mayukh, 2024).

Conversely, other studies highlight that higher DHL does not necessarily safeguard against cyberchondria. In certain cases, individuals with greater DHL may engage more frequently in online health searches, inadvertently increasing their health anxiety (Ban *et al.*, 2024).

Relevance in the digital era with increased internet penetration:

The rapid advancement of digital technology and widespread internet penetration have transformed how individuals seek health-related information. The internet has become a primary resource for medical knowledge, allowing people to access vast amounts of health data instantly. While this accessibility has empowered individuals to become more informed about their health, it has also contributed to the emergence of cyberchondria-excessive and compulsive online health searches leading to heightened anxiety and distress (Mubeen and T.F., 2019). With the growing reliance on digital platforms, search engines, and health-related websites, individuals

often encounter overwhelming or misleading medical content. The abundance of unverified and sometimes alarmist health information exacerbated concerns, particularly among those with pre-existing health anxiety (Bati *et al.*, 2018). Furthermore, algorithms on search engines and social media platforms may reinforce catastrophic thinking by prioritizing severe diagnoses, thereby fuelling the cycle of cyberchondria (Gandla *et al.*, 2021).

Prevalence of Cyberchondria: A global perspective

Cyberchondria, characterized by excessive and distressing online health searches, has been increasingly observed across different demographics worldwide. The prevalence varies based on factors such as age, gender, education level, and psychological predispositions. Research suggests that younger adults, particularly university students and frequent internet users, are more prone to cyberchondria due to their higher engagement with digital health resources (Starcevic *et al.*, 2020). Additionally, individuals with pre-existing health anxiety or obsessive-compulsive tendencies exhibit a heightened risk of developing cyberchondria, further emphasizing its psychological underpinnings (Gandla *et al.*, 2021). Medical students are particularly vulnerable to cyberchondria due to their extensive exposure to medical knowledge and frequent engagement with health-related information. A study by Gandla *et al.* (2021) found that a significant proportion of medical students exhibited cyberchondria-like tendencies, often experiencing increased anxiety after searching for symptoms online. Their academic background provides them with enhanced medical literacy, yet it also predisposes them to over-interpret benign symptoms as indicators of several illnesses. The phenomenon, sometimes referred to as “medical student syndrome,” is further exacerbated by the accessibility of vast, often unverified, medical content on the internet (Srivastava *et al.*, 2022).

Beyond medical students, cyberchondria has been widely documented in the general population. Studies indicate that individuals with high internet exposure, particularly those who frequently rely on online symptoms checkers, experience elevated health-related anxiety (Srivastava *et al.*, 2022). The study “Prevalence of Cyberchondria among outpatients” highlights that patients visiting healthcare facilities often exhibit distress due to self-diagnosis based on online searches, leading to unnecessary medical consultation and increased

healthcare burden (Vismara *et al.*, 2020). Furthermore, pandemic-induced health concerns have significantly contributed to a surge in cyberchondria cases, as individuals turned to the internet for medical information in the absence of direct healthcare access (Gandla *et al.*, 2021). Cyberchondria prevalence also varies across different cultural contexts. In Western societies, where digital health literacy is higher, individuals may be more critical of online health information, potentially mitigating extreme health anxiety. However, in regions with lower health literacy and greater reliance on online sources, the impact of cyberchondria can be more pronounced, leading to heightened health-related distress (Gandla *et al.*, 2021).

Psychological Factors of Cyberchondria:

Cyberchondria is deeply influenced by several psychological factors that drive excessive health-related internet searches and amplify health anxiety. Among these, health anxiety and hypochondriasis, cognitive biases, and excessive reassurance-seeking behaviour play significant roles in persistence of cyberchondria (Fergus *et al.*, 2013).

Health Anxiety and Hypochondriasis:

Health anxiety, often referred to as illness anxiety disorder, is a primary psychological driver of cyberchondria. Individuals with high health anxiety tend to misinterpret benign bodily sensations as indicators of severe illness, prompting them to search for medical information online (Gandla *et al.*, 2021). Unlike general health-conscious individuals, those with elevated health anxiety engage in compulsive online searches, which paradoxically increase distress rather than alleviate it. Hypochondriasis, an extreme form of health anxiety, is also closely linked to cyberchondria. Studies suggest that individuals with hypochondriacal tendencies experience persistent fears of having a serious illness, leading to obsessive health-related searches that reinforce their anxieties (Vismara *et al.*, 2020). This cyclical pattern results in heightened distress, as online searches often yield ambiguous or alarming medical information, exacerbating fears rather than providing reassurance.

Cognitive Biases in Cyberchondria:

Cognitive biases significantly influence how individuals interpret online health information, further fuelling cyberchondria. One such bias is the confirmation

bias, where individuals selectively focus on information that aligns with their pre-existing fears while disregarding evidence that contradicts them. For instance, a person experiencing mild headaches may search for “persistent headache causes” and focus on results suggesting brain tumours, reinforcing their fears despite that far more common benign explanations (Fergus and T.A., 2013).

Another common cognitive distortion in cyberchondria is catastrophic thinking, where individuals disproportionately focus on the worst-case scenario when encountering ambiguous health information online. Research has shown that individuals with high level of catastrophic thinking are more likely to experience distress after engaging in online symptoms searches. This tendency amplifies health anxiety and increases the likelihood of compulsive online health inquiries (Vismara *et al.*, 2020).

Excessive Reassurance-seeking behaviour:

Excessive reassurance-seeking is another psychological component of cyberchondria. Individual who engage in repeated online searches for health information often seek constant validation or reassurance, either from medical professionals, friends or family members (Vismara *et al.*, 2020). While seeking reassurance may temporarily reduce anxiety, it ultimately reinforces the cycle of cyberchondria, as individuals become dependent on external validation to manage their health concerns. Moreover, research suggests that excessive reassurance-seeking may contribute to doctor-shopping behaviour, where individuals visit multiple healthcare providers or repeatedly check online forums and symptom checker in an attempt to confirm or deny a feared diagnosis (Fergus and T.A., 2013).

Sociodemographic factors influencing Cyberchondria:

Cyberchondria is influenced by various sociodemographic factors that determine the likelihood of excessive health-related internet searches. Among these factors, age, gender, educational background, medical knowledge, and student status play significant roles in shaping individuals' online health-seeking behaviours (Tan *et al.*, 2017).

Age and Cyberchondria:

Age related differences in cyberchondria prevalence

have been widely discussed. Research suggests that younger individuals, particularly those in their teens and early adulthood, are more prone to cyberchondria due to their greater reliance on digital technologies (Mubeen *et al.*, 2019). Younger populations, especially university students, often engage in frequent health-related internet searches due to easy access to online information and heightened awareness of health concerns (Pawar *et al.*, 2022). However, some studies indicate that middle-aged individuals with chronic conditions or health anxieties may also develop cyberchondria, albeit at a lower prevalence than younger individuals (Pawar *et al.*, 2022).

Gender differences in cyberchondria:

Several studies highlight gender-based differences in cyberchondria prevalence. Women tend to exhibit higher levels of health anxiety and more frequent health-related searches, making them more susceptible to cyberchondria compared to men (Agrawal *et al.*, 2024). This trend aligns with broader research suggesting that women generally report greater health concerns and are more likely to seek medical information both online and offline (Hullur *et al.*, 2021).

Conversely, men are reported to engage less frequently in health-related searches although when they do, they may more likely to catastrophize symptoms. Additionally, some research suggests that men may avoid discussing health-related anxieties, leading to less frequent acknowledgment of cyberchondria symptoms, despite experiencing similar distress level as women (Vismara *et al.*, 2020).

Educational Background and Cyberchondria:

Educational level play a dual role in cyberchondria. Higher education levels are associated with greater internet literacy, which can lead to both increased health-seeking behaviour and better critical evaluation of online health information (Pawar *et al.*, 2022). However, studies indicate that highly educated individuals, particularly those with background in science and healthcare, may exhibit higher levels of cyberchondria due to increased access to medical literature and tendency to self-diagnose. In contrast, those with lower education level may also experience cyberchondria due to misinterpretation of medical information and reliance on unverified online sources (Pawar *et al.*, 2022).

Influence of Medical Knowledge and Student Status:

Medical students and healthcare professionals are paradoxically at higher risk for cyberchondria, despite their extensive medical knowledge. This phenomenon, often referred to as medical student syndrome, highlights the tendency of medical students to identify with symptoms they study, leading to excessive online searching and self-diagnosis. Moreover, individuals with formal medical training are more likely to overanalyse minor symptoms and use specialized databases, reinforcing health-related anxieties. While their knowledge helps them critically assess medical information, it also increases their exposure to severe medical conditions, potentially exacerbating cyberchondria-related distress (Pawar *et al.*, 2022).

Technological Factors influencing Cyberchondria:

The increasing reliance on digital platforms for health-related information has significantly contributed to the prevalence of cyberchondria. Several technological factors, such as search engines, misinformation, social media, and online health communities, play crucial roles in shaping individuals' online health-seeking behaviours. These elements can either provide accurate health information or exacerbate anxiety through the spread of misleading or unverified content (Sabir *et al.*, 2023).

The role of search engines and misinformation—Search engines such as Google, Bing and Yahoo are primary tools for individuals seeking health-related information. While these platforms offer vast repositories of medical knowledge, they often prioritize search engine optimization and engagement metrics over scientific accuracy. As a result, sensationalized content and severe disease outcomes are more likely to appear in top search results, leading to excessive worry and self-diagnosis (Vismara *et al.*, 2020). Furthermore, search engines lack the ability to differentiate between credible medical sources and misleading information. Many users, particularly those without medical background, struggle to assess the reliability of online health information, increasing their risk of misinterpreting benign symptoms as severe conditions. This process fuels a repetitive cycle of online symptom checking, heightened anxiety, and further searches, reinforcing cyberchondria (Agrawal *et al.*, 2024).

The impact of social media on cyberchondria:

Social media platforms, including Facebook, Twitter, Instagram, and TikTok, have become significant sources of health information. However, these platforms often

disseminate unverified, anecdotal or exaggerated health claims, contributing to public misinformation and increased anxiety (McMullan *et al.*, 2019). Social media algorithms promote engaging and emotionally charged content, which often prioritizes fear-inducing health narratives over scientific accuracy. Additionally, exposure to personal stories of severe medical conditions can lead individuals to internalize similar symptoms, increasing hypochondriacal tendencies. Studies have found that prolonged engagement with health-related content on social media correlates with higher levels of cyberchondria, particularly among young adults and individuals with pre-existing health anxiety (Hullur *et al.*, 2020).

Online Health communities and cyberchondria:

Online health forums and communities, such as WebMD forums, offer individuals a platform to share symptoms, discuss medical concerns, and seek peer advice. While these communities provide emotional support and valuable patient experiences, they also facilitate misinformation, self-diagnosis, and unnecessary anxiety (Fergus and T.A., 2013). In some cases, participation in online health communities leads to confirmation bias, where individuals selectively interpret information that aligns with their existing health fears. Additionally, many of these forums lack moderation by medical professionals, allowing misleading medical advice to circulate unchecked. The ease of access to anonymous discussions on rare diseases and severe medical conditions further fuels health-related distress, reinforcing obsessive symptom-checking behaviour (Srivastava *et al.*, 2022).

Impact of Cyberchondria on Health and Well-being:

Cyberchondria significantly affects individuals' mental health, healthcare behaviours, and doctor-patient interactions. The persistent urge to seek online medical information can escalate anxiety levels, deteriorate trust in healthcare professionals, and lead to self-diagnosis and unnecessary medical overuse (Poel *et al.*, 2016).

Increased Anxiety and Stress levels:

One of the most immediate effects of cyberchondria is heightened health anxiety and psychological distress. Continuous exposure to alarming and often misleading health information online reinforces catastrophic thinking patterns, causing individuals to overestimate the severity

of their symptoms (Sabir *et al.*, 2023). The uncertainty associated with online diagnoses fuels obsessive health concerns, leading to repetitive searches for medical explanations that increase stress rather than provide reassurance (Hullur *et al.*, 2020). Additionally, individuals experiencing cyberchondria tend to exhibit maladaptive coping strategies, where excessive online searching creates a negative feedback loop-the more one searches for reassurance, the greater their anxiety becomes (Fergus *et al.*, 2013). Overtime, this behaviour can contribute to generalized anxiety disorder (GAD) or health-related obsessive-compulsive symptoms (Srivastava *et al.*, 2022)

Effects on Doctor-Patient Relationship and Healthcare Utilization:

Cyberchondria can undermine trust between patients and healthcare professionals. When individuals rely on online sources over medical expertise, they may challenge doctors' diagnoses, demand unnecessary tests, or reject professional advice (Sucu *et al.*, 2024). This doctor-patient conflict can result in frustration for both parties, reducing the efficiency of medical consultations and leading to poorer health outcomes. Moreover, increased healthcare utilization is a common consequence of cyberchondria. Those affected by severe health-related anxiety tend to schedule frequent medical appointments, request unwarranted diagnostic test, and demand specialist referrals based on their self-diagnosed conditions (Hullur *et al.*, 2020). This overuse of medical resources places a significant burden on healthcare systems, contributing to longer wait times and unnecessary medical expenditures. Conversely, in some cases, cyberchondria may lead to medical avoidance, where individuals distrust healthcare providers to the extent that they delay seeking professional medical advice. This reluctance can result in missed diagnoses and deteriorating health conditions due to lack of timely intervention (Srivastava *et al.*, 2022).

Self-Diagnosis and medical overuse:

Self-diagnosis is another critical issue associated with cyberchondria. Individuals interpreting ambiguous or common symptoms as indications of severe medical conditions often experience inappropriate medical overuse, where they pursue unnecessary treatments and diagnostic procedure (Sucu *et al.*, 2024). A major drawback of self-diagnosis is the increased likelihood of

misdiagnosing serious conditions, leading to either unwarranted medical interventions or a delay in appropriate treatment. Furthermore, excessive exposure to online medical content can lead to nocebo effects, where individuals develop physical symptoms purely based on their anxiety-induced expectations (Vismara *et al.*, 2020).

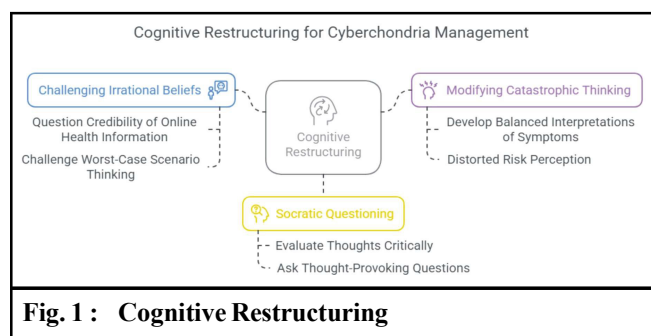
Interventions Strategies for enhancing Digital Health Literacy:

Cyberchondria can be effectively managed through structured psychological interventions aimed at reducing excessive online health-seeking behaviours and mitigating associated anxiety. Among the most effective approaches, Cognitive Behavioural Therapy (CBT), Cognitive restructuring techniques, and psychoeducation programs play pivotal role in helping individuals regulate their thoughts and behaviours related to cyberchondria (Jokic-Begic *et al.*, 2020).

Cognitive Behavioural Interventions has been widely recognized as an effective therapeutic approach for treating health-related anxiety and, by extension, cyberchondria. This intervention targets maladaptive thought patterns and compulsive online health searches, helping individuals recognize and modify their excessive internet use for self-diagnosis (Bati *et al.*, 2018). CBT-based techniques include exposure therapy, behavioural experiments and response prevention strategies, all of which aim to reduce compulsive reassurance-seeking behaviour and improve overall emotional regulation (Bajcar *et al.*, 2019). One of the core CBT strategies involves monitoring online health search behaviours and implementing gradual exposure techniques. This helps individuals identify triggers and develop alternative coping mechanisms, such as redirecting attention away from distressing medical searches and engaging in relaxation techniques (Starcevic *et al.*, 2013).

Cognitive restructuring focuses on challenging and modifying irrational belief and catastrophic thinking patterns that fuel cyberchondria. Individuals suffering from cyberchondria often misinterpret benign symptoms as severe medical conditions, leading to distorted risk perception (Starcevic *et al.*, 2022). Through cognitive restructuring, individuals learn to question the credibility of online health information, challenge worst-case scenario thinking, and develop balanced interpretations of symptoms (Starcevic *et al.*, 2013).

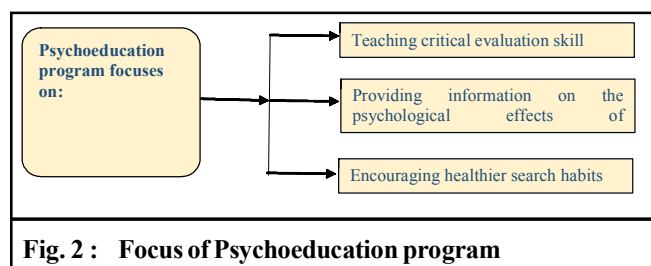
A key component of this technique is Socratic



questioning, which encourages individuals to critically evaluate their thoughts by asking (Fig. 1):

By restructuring these cognitive distortions, individuals become less prone to panic-induced online searches, reducing their overall health anxiety and reassurance-seeking behaviours (Fergus *et al.*, 2013)

Psychoeducation plays a crucial role in enhancing digital health literacy and improving awareness about cyberchondria. Educational interventions aim to equip individuals with the skills to differentiate between reliable and misleading health information while promoting a rational approach to online medical searches (Vismara *et al.*, 2020) (Fig. 2).



Digital intervention, such as self-help modules and mobile applications, have also been developed to assist individual in managing their cyberchondria-related behaviours (Ban *et al.*, 2020). These platforms offer structured psychoeducation, guided cognitive restructuring exercises, and behavioural tracking tools to help users gradually reduce excessive health-related internet use (McMullan *et al.*, 2019).

Digital health literacy encompasses the ability to

seek, find understand and appraise health information from electronic sources and apply this knowledge to health situation. It integrates traditional literacy with digital competencies, enabling individuals to navigate the vast landscape of online health resources effectively. Enhancing digital health literacy is crucial for empowering individuals to critically evaluate the credibility and relevance of online health information, thereby mitigating the risk associated with misinformation (Sucu *et al.*, 2024). A scoping review highlights that while digital technologies can improve healthcare access, they may also widen health disparities for those with limited digital literacy. Therefore, fostering digital health literacy is essential to ensure equitable access to reliable health information and service (Ban *et al.*, 2024).

Healthcare professionals play a critical role in addressing cyberchondria by guiding patients toward responsible online health information-seeking behaviours. This involves educating patients about the potential pitfalls of online health information, including exposure to inaccurate or alarmist content, and encouraging the use of reputable sources. By assessing patients' internet usage pattern and providing anticipatory guidance, healthcare providers can help mitigate anxiety stemming from excessive online searches (Sucu *et al.*, 2024). Furthermore, integrating digital health literacy into patient education can enhance individuals' ability to discern credible information, reducing the likelihood of cyberchondria. Healthcare professionals can recommend trustworthy websites, discuss strategies for evaluating online content, and address any misconceptions arising from online information (Ybarra *et al.*, 2006).

METHODOLOGY

The selection of studies for this review is focusing on the prevalence of cyberchondria across different populations. Studies employing quantitative, qualitative, and mixed-method approaches were included, with particular emphasis on those assessing cyberchondria using validated psychological scales or self-report measures (Table 1).

Table 1 : Inclusion criteria and Exclusion criteria of cyberchondria

Inclusion criteria	Exclusion criteria
Studies focus on the prevalence, risk factors, and psychological impact of cyberchondria	Studies not directly measuring cyberchondria or its prevalence.
Research involving diverse populations, including general internet users and individuals with health anxiety.	Research focused solely on general health information-seeking behaviour without assessing psychological distress or compulsive searching.

Data sources fetched by multiple databases, including PubMed, Science Direct, Medicine, and Coherent Library.

The Cyberchondria Severity Scale (CSS) developed by McElroy and Shevlin (2014) is the most widely used tool, evaluating dimensions such as compulsion distress, reassurance-seeking, excessiveness, and mistrust of medical professionals. Other studies have utilized adaptations of the Short Health Anxiety Inventory to examine the relationship between cyberchondria and health anxiety.

Conclusion:

In the digital era, the widespread availability of online health information has transformed how individual engage with their health. While this accessibility offers numerous benefits, it also presents challenges, notably the rise of cyberchondria- a pattern of excessive and anxiety-inducing online health searches. This review has examined the intricate relationship between Digital Health Literacy(DHL) and cyberchondria, highlighting key psychological, social, and technological factors that contribute to this phenomenon. Research indicates that individual with lower DHL may struggle to critically evaluate online health information, making them more susceptible to health-related anxiety and the development of cyberchondria. Conversely, higher DHL can equip individuals with skills necessary to discern credible sources and interpret medical content accurately, potentially mitigating unnecessary distress. However, the relationship is complex; some studies suggest that even those with higher DHL might engage more frequently in online health searches which could inadvertently increase anxiety if not managed appropriately.

Intervention such as Cognitive Behavioural Therapy have proven effective in addressing maladaptive thought patterns associated with cyberchondria. Integrating digital health literacy components into these interventions can further empower individuals to discern credible information sources, thereby reducing anxiety-driven health searches. Healthcare professionals play a crucial role in this context by guiding patients toward reputable online resources and educating them about the potential pitfalls of indiscriminate internet searches. In conclusion, enhancing digital health literacy is instrumental in mitigating cyberchondria. By equipping individuals with the skills to critically evaluate online health information and integrating these competencies into psychological

interventions, we can address the root cause of cyberchondria.

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