Living Well with a Long-Term Health Condition:

6. Making Your Thoughts Work for You

Why this leaflet?

This resource is intended for people who are living with, or have recently been diagnosed with, a long-term health condition. There is advice about how thoughts can play a big part in managing a long-term health condition. You may need to adapt things slightly to your own situation and it can take a little time and patience to learn to make you thoughts work for you in the best possible way. If you have concerns about anything or how to adapt things to your own particular needs, please ask your GP or your health care professional.

The full range of IMPARTS booklets can be found at: <u>https://imparts.org/resources-self-help/</u>

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What about thoughts?

We know from research that our thinking can affect our mood, our ability to cope with and how we manage difficult situations. Thoughts can also impact our physical symptoms. Thoughts are so powerful that they can sometimes even contribute to important functions like blood pressure and heart rate. If you are living with a longterm health condition, your thoughts can therefore affect the way you experience the symptoms of your condition. Your thoughts can sometimes make your symptoms seem worse. However, the good news is that you can also learn to use your thoughts to help you manage your symptoms and improve your wellbeing. This resource will provide an introduction on how you can do this.

What are thoughts?

Everyone has thoughts all of the time. They are a little bit like the commentary that is always running in our heads. Many of these thoughts relate to decision making and affect how your run your day and how you feel. For example, when you wake up in the morning you might think 'what have I got to do today?' 'what time is it?'. You might look outside and see what the weather looks like! When you go outside and

wait for a bus you might be thinking 'am I going to be on time for my appointment?'. Many of these thoughts are about everyday, mundane things and are not particularly emotional. However, we can also have thoughts that are based on our feelings, worries and fears. For example, 'will I have side effects from my new medication, and if I do how will I cope?' or 'what is my employer going to say if I need another day off to attend a hospital appointment?'. It is these thoughts, that represent our worries and fears, that can be so important in how we manage a long-term condition and the way we understand symptoms.

Your thoughts about a situation affect how you feel and how you respond. For example, if you heard a bump in the night and thought it was your cat, you might feel annoyed but roll over and go back to sleep. However, if you believed it was a burglar you might feel scared and perhaps call the police.

Over time and based on our own experiences and others around us, we can develop thinking patterns. Sometimes these patterns can be unhelpful, especially in managing a health condition. We can quickly spiral into a pattern of thinking that can make managing things and symptoms seem hopeless and overwhelming. The good news is that we can learn to make our thoughts work for us and be helpful rather than harmful to our symptoms.

Thoughts are powerful!

This diagram shows how thoughts interact very closely with how we feel (our emotions), how we do things and what we do (our behaviour) and our physical feelings (how our body feels). All of these things are related and can influence the other, usually without us knowing. This diagram shows how one thought 'I can't bear this' can influence the other three things. A vicious cycle can quickly develop and we begin to feel that everything is getting out of hand.



Often, we don't know which comes first – our thoughts, our behaviour or our physical feelings. However, research tells us that changing our anxious and scary thoughts to something more reassuring can lessen the impact or even significantly change the effect of our thoughts on our behaviour, feelings and physical feelings.

This can take time and patience at first. It helps to know your own thought patterns well enough to change the unhelpful thought to something more helpful.

This diagram shows how changing the one thought can help to create positive change in behaviour, feelings and physical feelings. You can see that we haven't changed the thought to the complete opposite (I.e., 'I am fine with this') but changed it to something a bit more hopeful and less overwhelming.



Can you change thoughts?

Yes, you can! With a bit of practice, you can learn to change your thoughts!

An important first step in changing thoughts is to understand how your thinking patterns and your thoughts can be unhelpful. It can be quite useful to keep a diary whilst you learn about your thinking patterns.

When you are feeling particularly overwhelmed try and note down what you are thinking. Try to identify the words you are actually saying to yourself. What commentary is going through your head? Try to think about the words that you are saying to yourself rather than the feeling or the emotion that goes along with it. Sometimes it can be quite hard to separate the words from the feeling, but it helps if you can!

Different ways of thinking

Sometimes we can get into habits (or patterns) of thinking that can be unhelpful. If these patterns are particularly strong, we are more vulnerable to the longer term emotional, behavioural and physiological effects of unhelpful thinking. There are also lots of other things you have to manage and more things to worry about if you have a long-term condition.

Therefore, if you have a long-term condition, it can be particularly important to check out your patterns of thinking. You can try and change these patterns so that you are being realistic and kinder to yourself.

Here are some common unhelpful thinking styles. There is also a suggestion for a more helpful thought.

Thinking style	Example
Thinking the	I will get all the complications it is possible to get
worst	and lose my independence sooner rather than later.
	Another way: I know I may get some complications,
	but I am going to manage them as best as I can.
Mind reading	My doctor thinks I am a lost cause and dreads me
	coming in for appointments. Another way: Maybe
	the doctor is just telling me these things because
	they have to. It is important for me to understand
	my condition and the doctor (or health care
	professional) can help me.
Predicting the	I will definitely end up needing lots of care. Another
future	way: I am going to take things one day at a time. It
	isn't certain that I might need so much care and I
	am going to manage things as best as I can at the
	moment.
Overgeneralising	That high blood pressure reading today means my
	blood pressure is out of control. Another way: This
	is just one blood pressure reading out of many and
	I must be careful not to jump to the worst
	conclusions because of one reading.
Jumping to	The doctor spent a long time talking about the risks
conclusions	of my medication and treatment plan. That must be
	because I am very a high-risk patient and things will
	almost definitely go wrong for me. Another way: It is
	the doctor's job to tell people about the risks and
	problems. It doesn't mean it will go wrong for me.

These examples show how these thought patterns, or thought traps, can make you think more pessimistically about your health problems, future and recovery. As you can see, it can be easy to get into a vicious cycle with these thinking patterns. As our thoughts have such a powerful influence (as described in 'thoughts are powerful!' section), they can make the symptoms of a long-term condition seem worse, which in turn only seems to make the thoughts seem true.

It can sometimes be quite hard to break out of this vicious cycle. Have a look at the alternative ways of thinking suggested and see if something like those might help you.

Useful questions to ask yourself

Did any of these thought patterns or habits sound familiar to you? It can help to ask yourself the following questions:

Is there any evidence against this thought?

When you feel very bad, physically or emotionally, it is easy to imagine that the worst will happen or that you won't be able to cope. However, you might remember times in the past when you coped during hard times. Reminding yourself of these times might help you think of things you can do that will help you feel a little better.

Is there anything I can do about this problem?

Have you ever tackled difficult problems before? You might be able to draw on your own experiences or the experiences of friends and family to come up with a plan to deal with the problem.

Have a look at the leaflet in this series:

Problem Solving

Is there another way of thinking about the situation?

For example, the doctor may have been talking about all the risks because it is part of their job to tell each patient what could go wrong. It might not mean that you necessarily have more problems than other people. Talking to others for their ideas about a situation can help. Sometimes a different view (especially someone who might not be so directly involved) can be helpful.

Is it helpful to think this way?

For example, if you have had a setback or become particularly unwell, understandably it can really get you down. Focusing on these setbacks are likely to make you feel more worried and disheartened. Try to think about how you have overcome setbacks in the past and pay attention to any signs, however small, that things are improving.

What would you say to a friend or someone you love?

If a friend or loved one was struggling with lots of health problems and told you they were stressed and tense, what would you advise them to do? Would you say kind, compassionate things to them and show them you understand their struggles or tell them to pull their socks up?

Try to take this kinder attitude towards yourself and try not to fall into the trap of being much harder on yourself than you would ever be on others. This is not fair on you and probably not helpful.

What if I don't believe it?

To begin with, it can be hard to say some of these things to yourself. Perhaps you don't really believe what you are thinking or saying. It might almost seem as though you are 'kidding' yourself. The important thing to remember is that by learning to change your thoughts it is actually a step forward in believing those things too. Thoughts really are that powerful.

Try to identify the unhelpful 'thought patterns' that you are most vulnerable to. You might not really believe it at first but stick with your new thought and it will begin to sit more comfortably with you. This does take patience and may take a little time. Always work on one thing at a time.

Next steps

If you think you are vulnerable to falling into unhelpful 'thought patterns', keep a diary to find out a bit more clearly about when and how you are most vulnerable to this.

- Try to notice the times when you are most vulnerable to any of these thought traps.
- Have a look at the ideas in this leaflet and see if you can put any of them into practice.

- 'One step at a time'. It always helps to take things slowly and patiently and will help you to notice any changes.
- Share the ideas in this resource with someone who can support you.
- The ideas in this resource form the basis of Cognitive Behavioural Therapy (CBT). If you feel that you need some more guidance to help you change your thought patterns you can get CBT. This is available on the NHS. You might ask your GP to refer you to a local IAPT (Improving Access to Psychological Therapies) Service, or you can refer yourself.

Kings Patient Advice and Liaison Service (PALS)

This is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. The PALS office is located on the ground floor of the Hambleden Wing, near the main entrance on Bessemer - staff will be happy to direct you.

Their website can be found here: PALS – King's College Hospital NHS Foundation Trust (<u>kch.nhs.uk/patientsvisitors/help-and-support/pals</u>).

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Providing feedback

We welcome your feedback on this series of leaflets, please use the QR code or the link below to access a short survey. <u>https://forms.office.com/e/R86s27gqfa</u>



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