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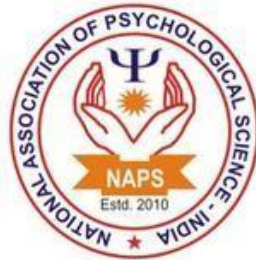
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Psychological Predictors of Cyberchondria: The Role of Health Anxiety and Illness Perception in Young Adults

Ritu Sekhri

Abstract

The present study aimed to examine the relationship between cyberchondria, health anxiety, and illness perception among young adults and to investigate the predictive role of health anxiety and illness perception in determining cyberchondriac behavior. A quantitative, cross-sectional correlational design was employed. The sample consisted of 240 young adults (120 males and 120 females) aged 18–25 years, selected using stratified random sampling from higher education institutions. Data were collected using the Cyberchondria Severity Scale (CSS), Short Health Anxiety Inventory (SHAI), and Brief Illness Perception Questionnaire (Brief IPQ). Statistical analyses included descriptive statistics, Pearson's correlation, and multiple regression using SPSS software. The findings revealed a significant positive correlation between cyberchondria and health anxiety ($r = 0.61, p < .01$), as well as between cyberchondria and illness perception ($r = 0.54, p < .01$). Multiple regression analysis indicated that health anxiety and illness perception together accounted for 47% of the variance in cyberchondria ($R^2 = 0.47, p < .001$). Health anxiety emerged as the strongest predictor, followed by illness perception. The study demonstrates that cyberchondria in young adults is significantly shaped by both emotional factors and cognitive representations of illness. These findings highlight the importance of addressing health anxiety and maladaptive illness perceptions through psychological interventions and digital health literacy programs to reduce excessive online health information seeking behaviors in young populations.

Keywords: *Cyberchondria, Health Anxiety, Illness Perception, Young Adults, Digital Health Behavior, Online Health Information*

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INTRODUCTION

The rapid digitization of healthcare information has transformed contemporary health behavior, particularly among young adults. With the proliferation of search engines, symptom-checker websites, and AI-based medical platforms, individuals are increasingly turning to the internet as their first point of consultation for health concerns. While such technological advancements have enhanced accessibility to health-related knowledge, they have also inadvertently contributed to a growing psychological phenomenon known as cyberchondria, a pattern of excessive online health

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information searching that paradoxically increases anxiety instead of reducing it.

Cyberchondria represents a modern manifestation of health-related anxiety within the digital matrix. Unlike traditional reassurance-seeking behaviors such as frequent doctor visits, cyberchondria is characterized by compulsive online checking of symptoms, persistent searching for possible diseases, and the repeated consumption of medical content that often escalates fear. Young adults are particularly vulnerable to this phenomenon due to their high levels of digital engagement, cognitive

curiosity, and transitional life stressors. Their developmental phase, marked by identity formation, academic pressure, bodily self-awareness, and future uncertainties, further amplifies their susceptibility to health-related worries.

Among the psychological constructs closely associated with cyberchondria, health anxiety plays a central role. Health anxiety refers to a condition in which individuals persistently misinterpret normal or minor bodily sensations as signs of serious illness. This cognitive distortion is not merely a clinical concern but a behavioral predisposition that significantly affects information-processing patterns in the digital sphere. Individuals with high health anxiety exhibit increased vigilance towards physical sensations and tend to excessively consult online sources for reassurance. However, as online health platforms often present probabilistic or worst-case scenarios, such searches frequently reinforce catastrophic interpretations.

Another crucial but comparatively less explored construct in this context is illness perception. Illness perception refers to the cognitive and emotional representations that individuals form about illnesses, including beliefs regarding cause, controllability, duration, consequences, and severity. According to Leventhal's Self-Regulatory Model, such perceptions directly influence emotional responses and coping behaviors. In the digital age, illness perceptions are continuously shaped and reshaped by online medical content, social media discussions, and algorithm-driven health information. Negative or distorted illness perceptions may, therefore, intensify cyberchondriac tendencies, creating a feedback loop between cognition, emotion, and behavior.

While international literature has begun to recognize cyberchondria as a significant mental health concern in technologically

advanced societies, research in the Indian and South Asian socio-cultural context remains sparse. The psychological impact of online health information in developing digital environments is still underexplored, and empirical studies integrating cognitive variables like illness perception with health anxiety are rare. Most previous research has examined cyberchondria either as an outcome of anxiety sensitivity or as a correlate of general anxiety disorders, neglecting the complex cognitive mechanisms underlying this behavior.

In the Indian context, where internet accessibility is rapidly expanding and health literacy levels vary widely across populations, young adults are increasingly exposed to unregulated medical information. This makes them highly vulnerable to misinformation, catastrophic health interpretations, and anxiety-based online health behaviors. However, there is a significant lack of structured academic research that explores how health anxiety and illness perception operate together to influence cyberchondriac behavior among young adults in India.

Aim of the Study

The present study aims to systematically examine the relationship between cyberchondria, health anxiety, and illness perception among young adults, with a specific focus on understanding how cognitive representations of illness contribute to excessive online health-related searching behavior. In addition to exploring the direct associations among these variables, the study also seeks to analyze the predictive role of illness perception and health anxiety in shaping cyberchondriac tendencies in a digitally connected population. By doing so, this research attempts to uncover the underlying psychological mechanisms through which online health information consumption influences emotional distress

and behavioral responses among young adults.

Significance of the Study

The significance of the present study lies in its contribution to the growing domain of digital health psychology, an emerging field that explores the interaction between psychological processes and digital health behaviors. In an era where online health information is consumed on a daily basis, understanding the psychological consequences of such engagement has become a critical concern for mental health professionals, educators, and public health planners. This study contributes to this area by examining cyberchondria not merely as a behavioral habit, but as a cognitive-emotional construct influenced by illness perceptions and health anxiety.

Furthermore, the integration of illness perception into the conceptual framework enhances the explanatory power of existing models that explain online health anxiety. Most previous studies have primarily focused on anxiety sensitivity or generalized anxiety; however, by incorporating cognitive illness representations, this research offers a more comprehensive understanding of how individuals interpret bodily symptoms in the digital era. The findings will be particularly relevant for clinical psychologists and counselors who deal with clients exhibiting excessive health concerns and internet-based reassurance-seeking behaviors.

In addition, the study holds practical relevance for educational institutions and youth mental health initiatives, as it provides empirical evidence regarding the psychological risks associated with unregulated exposure to online medical information. Universities and educational bodies can use these insights to design digital literacy programs aimed at promoting critical evaluation of online health content. At a

broader level, the findings may assist public health policymakers in developing intervention strategies that encourage responsible digital health behavior and reduce anxiety-driven overconsumption of health information in young populations.

Research Outline

The present research paper is structured into seven systematically organized sections to ensure clarity, coherence, and logical progression of ideas. The first section introduces the conceptual background, research rationale, and the psychological significance of examining cyberchondria in young adults. The second section critically reviews existing literature and identifies the research gap addressed by the current study. The third section presents the objectives and hypotheses in a refined and structured manner. The fourth section describes the research methodology, including design, sample, tools, procedure, and statistical techniques. The fifth section reports the results along with appropriate statistical interpretation of the findings. The sixth section discusses these findings in connection with established theoretical perspectives and previous research. The final section concludes the study by summarizing key findings and presenting the implications, limitations, and directions for future research.

Research Contribution

The present study contributes to the existing body of knowledge by offering an integrated psychological model of cyberchondria that combines cognitive, emotional, and behavioral components within a single empirical framework. Unlike earlier studies that have largely concentrated on Western populations or approached cyberchondria as an isolated phenomenon, this research provides culturally contextualized evidence from an Indian young adult population, which is experiencing a rapid digital

transition. By examining the predictive role of illness perception alongside health anxiety, the study extends existing theoretical perspectives, particularly the Self-Regulatory Model of illness, into the digital health domain.

Moreover, this research adds long-term value by highlighting cyberchondria as not merely a technological side effect but as a serious psychological concern linked with maladaptive cognition patterns. The findings offer new directions for interdisciplinary research integrating health psychology, digital media psychology, and behavioral medicine. In doing so, this study strengthens the academic understanding of how online health environments shape psychological vulnerability in emerging digital societies.

Literature Review

With the rapid increase in internet accessibility and digital health platforms, cyberchondria has emerged as a significant psychological phenomenon within the domain of health psychology. Early conceptualizations of cyberchondria described it as an extension of health anxiety, but recent empirical studies have demonstrated that it is a multidisciplinary construct involving cognitive distortions, emotional distress, and maladaptive behavioral patterns.

Starcevic and Berle (2013) were among the first researchers to systematically conceptualize cyberchondria as a condition where individuals engage in excessive online health information seeking that paradoxically increases anxiety. Their study highlighted that individuals with heightened intolerance of uncertainty are more likely to develop repetitive internet-based health checking behaviors. This work laid a foundation for understanding cyberchondria beyond simple curiosity, identifying it as a reassurance-

seeking behavior rooted in underlying anxiety.

McElroy and Shevlin (2014) further expanded this conceptualization by developing the Cyberchondria Severity Scale (CSS). Their findings demonstrated that cyberchondria is significantly correlated with health anxiety, obsessive-compulsive symptoms, and anxiety sensitivity. Individuals with higher levels of cyberchondria demonstrated greater difficulty in controlling online health searches, leading to emotional dysregulation and increased psychological distress.

In subsequent research, Fergus and Spada (2017) conducted a meta-analysis focusing on the relationship between health anxiety and cyberchondria. Their results indicated that cyberchondria not only coexists with health anxiety but also intensifies illness-related fears by reinforcing catastrophic health beliefs. They argued that repeated exposure to online health content leads to cognitive confirmation bias, wherein individuals only seek information that confirms their existing fears.

Health anxiety itself has been extensively studied as a clinical and subclinical phenomenon. Salkovskis et al. proposed that health anxiety develops through misinterpretation of bodily sensations and excessive safety-seeking behaviors. More recent studies by Asmundson and Taylor (2020) indicate that individuals with high health anxiety exhibit heightened sensitivity to health-related stimuli, increased reassurance-seeking, and poor tolerance for medical uncertainty. These individuals are more likely to rely on online sources due to the immediacy and perceived anonymity provided by digital platforms.

While health anxiety has been widely discussed, the role of illness perception in cyberchondria remains relatively underexplored. Leventhal's Self-Regulatory Model proposes that individuals form cognitive representations of illness based on dimensions such as identity, cause, timeline, consequences, controllability, and coherence. These representations guide emotional responses and coping behaviors. Broadbent et al. demonstrated that maladaptive illness perceptions are associated with greater psychological distress, poorer treatment adherence, and heightened symptom monitoring.

Recent studies by Köteles et al. (2021) suggest that individuals who perceive illnesses as severe, uncontrollable, and long-lasting are more likely to exhibit cyberchondriac behaviors. They found that threatening illness representations intensify online health searching as individuals attempt to regain a sense of certainty and control. However, instead of reducing uncertainty, such behavior often leads to additional confusion and anxiety due to the overwhelming and contradictory nature of online medical information.

Baumgartner and Hartmann (2020) investigated how exposure to online medical content influences illness perception and health-related emotions. Their findings demonstrated that individuals consuming alarming health content develop more catastrophic illness beliefs and report higher levels of perceived vulnerability. This altered illness perception further contributes to increased health anxiety and compulsive information seeking.

In the post-COVID era, cyberchondria has received increased research attention. Studies by Jokic-Begic et al. (2021) revealed that pandemic-related uncertainty significantly

amplified online symptom-checking behavior in young adults. The constant exposure to pandemic-related health information not only increased health anxiety but also altered perceptions of illness severity and personal vulnerability.

Despite this growing body of research, most studies have been conducted in Western countries, primarily in Europe and North America. Cultural factors, health belief systems, and digital literacy levels vary significantly across different populations. In developing countries like India, where internet penetration has increased rapidly but health literacy remains uneven, the psychological impact of online health information may manifest differently. However, empirical research exploring cyberchondria in the Indian socio-cultural context is still extremely limited.

Furthermore, most existing studies treat health anxiety as the primary predictor of cyberchondria, while ignoring the complex cognitive framework of illness perception. Very few works have examined how these two variables interact in predicting cyberchondria within young adult populations, especially in non-Western settings.

Objectives

The present study has been formulated with the following refined and original objectives:

1. To assess the prevalence and intensity of cyberchondriac behavior among young adults in relation to their online health information usage.
2. To examine the relationship between health anxiety and cyberchondria among young adults.
3. To explore the association between illness perception and cyberchondria, with special reference to perceived

illness severity, control, and consequences.

- 4 To analyze the joint predictive influence of health anxiety and illness perception on cyberchondria.
- 5 To identify the relative contribution of cognitive (illness perception) and emotional (health anxiety) factors in explaining individual differences in cyberchondriac tendencies.

Hypotheses

The hypotheses for the present study have been framed on the basis of theoretical foundations and previous empirical findings, while maintaining originality in formulation:

H1: There will be a statistically significant positive association between health anxiety and cyberchondria among young adults.

H2: There will be a statistically significant positive association between maladaptive illness perception and cyberchondria.

H3: Health anxiety will significantly predict cyberchondria, even after controlling for illness perception.

H4: Illness perception will independently and significantly contribute to the prediction of cyberchondria.

RESEARCH METHODOLOGY:

Sample:

The sample consisted of 240 young adults, including 120 males and 120 females, aged between 18 and 25 years. Participants were recruited from different universities and higher education institutions through a stratified sampling strategy to ensure equal gender representation and minimize selection bias. Only individuals who reported regular internet use and active engagement with digital devices were included, as

cyberchondria is inherently linked with online health information-seeking behavior. Participants with diagnosed severe psychiatric disorders or those currently undergoing clinical treatment for anxiety-related conditions were excluded to reduce potential confounding effects on psychological measures.

Tools

Cyberchondria was assessed using the Cyberchondria Severity Scale developed by McElroy and Shevlin, which measures compulsive online health searching, associated distress, and reassurance-seeking tendencies. Health anxiety was assessed through the Short Health Anxiety Inventory (SHAI), a widely recognized instrument designed to evaluate illness-related anxiety irrespective of current physical health status. Illness perception was measured using the Brief Illness Perception Questionnaire (Brief IPQ), which assesses cognitive and emotional representations of illness across multiple dimensions. All instruments were administered in English as the participants were university students with sufficient proficiency in the language.

Statistical Analysis

Following data collection, all responses were coded and entered in to SPSS software for statistical analysis. Descriptive statistics, including mean and standard deviation, were computed to determine the central tendencies and dispersion of the study variables. Pearson's product-moment correlation coefficient was calculated to examine the relationships between cyberchondria, health anxiety, and illness perception. In addition, multiple regression analysis was conducted to assess the predictive contribution of health anxiety and illness perception to cyberchondriac behavior. A significance level of $p < 0.05$ was adopted for all statistical interpretations, in accordance with

conventional standards in psychological research.

RESULTS:

The statistical analysis was conducted to examine the relationships between cyberchondria, health anxiety, and illness perception, and to determine the predictive

contribution of health anxiety and illness perception to cyberchondriac behavior among young adults. The results are presented below in terms of demographic characteristics, descriptive statistics, correlation analysis, and multiple regression analysis.

Table 1: Demographic Characteristics of Participants (N = 240)

Variable	Category	Frequency	Percentage
Gender	Female	120	50%
	Male	120	50%
Academic Level	Undergraduate	149	62%
	Postgraduate	91	38%
Daily Internet	Use Less than 2 hours	36	15%
	2–4 hours	33	14%
	More than 4 hours	171	71%

The demographic profile indicates that the sample was balanced in terms of gender and consisted largely of digitally active university students. A substantial proportion of participants reported spending more than four hours daily on the internet, suggesting high exposure to online health-related content, which is relevant to the present investigation.

Table 2: Descriptive Statistics of Study Variables

Variable	Mean	Standard Deviation
Cyberchondria	67.8	10.4
Health Anxiety	21.6	6.2
Illness Perception	23.9	5.7

The mean score of 67.8 for cyberchondria indicates a moderate to high level of cyberchondriac behaviour among young adults. The mean value for health anxiety (21.6) reflects noticeable health-related concerns within the sample, while the illness perception score (23.9) indicates moderately strong cognitive representations of illness

Table 3: Correlation Matrix between Study Variables

Variables	Cyberchondria	Health Anxiety	Illness Perception
Cyberchondria	1.00		
Health Anxiety	0.61**	1.00	
Illness Perception	0.54**	0.49**	1.00

Note: **p < 0.01

The results revealed a strong and statistically significant positive correlation between cyberchondria and health anxiety ($r = 0.61, p < .01$), indicating that individuals with higher levels of health-related worry tend to engage more in excessive online health information searching. Similarly, cyberchondria was significantly and positively correlated with illness perception ($r = 0.54, p < .01$), suggesting that those who perceive illnesses as more threatening, severe, and uncontrollable display higher cyberchondriac tendencies. A moderate positive correlation between

health anxiety and illness perception ($r = 0.49, p < .01$) further demonstrates the interconnected nature of emotional and cognitive health beliefs.

Table 4: Model Summary of Multiple Regression

Model	R	R ²	Adjusted R ²	Std. Error of Estimate
1	0.685	0.47	0.46	7.93

The model summary indicates a moderately strong predictive relationship between the independent variables and cyberchondria. The R value of 0.685 suggests a strong correlation between predicted and observed cyberchondria scores. The R² value of 0.47 indicates that 47% of the total variance in

cyberchondria can be explained by the combined influence of health anxiety and illness perception. The adjusted R² value of 0.46 confirms the model’s stability after adjusting for the number of predictors, while the standard error value of 7.93 reflects acceptable predictive accuracy.

Table 5: Multiple Regression Analysis Predicting Cyberchondria

Predictor Variables	p	B	β	t
Health Anxiety	.001	0.52	0.48	8.23
Illness Perception	.001	0.37	0.31	5.76

The regression analysis demonstrated that both health anxiety and illness perception significantly predicted cyberchondria. Health anxiety emerged as the stronger predictor ($\beta = 0.48, p < .001$), indicating that emotional distress related to health plays a dominant role in driving excessive online health searches. Illness perception also significantly predicted cyberchondria ($\beta = 0.31, p < .001$), highlighting that maladaptive cognitive representations of illness contribute independently to cyberchondriac behaviour.

Overall, these findings confirm that cyberchondria among young adults is strongly influenced by both emotional factors (health anxiety) and cognitive factors (illness perception). The results provide strong empirical support for the study hypotheses and underscore that cyberchondria is not merely a digital habit but a psychologically driven response shaped by distorted illness beliefs and heightened health-related anxiety.

DISCUSSION:

The present study was undertaken to examine the psychological determinants of cyberchondria among young adults, with specific emphasis on the roles of health anxiety and illness perception. The findings of the study provide strong empirical support for the proposed conceptual framework, demonstrating that cyberchondria is significantly influenced by both emotional vulnerability and cognitive representations of illness. These results are particularly relevant in the contemporary digital environment, where young adults are continuously exposed to vast amounts of unfiltered online health information.

The correlation analysis revealed a strong positive relationship between cyberchondria and health anxiety ($r = 0.61, p < .01$), which indicates that individuals who experience

higher levels of health-related worry tend to engage more frequently in excessive online health information seeking. This finding is consistent with cognitive-behavioral models

of health anxiety, which propose that anxious individuals use the internet as a reassurance-seeking tool to reduce uncertainty regarding their health. However, instead of alleviating anxiety, exposure to alarming health-related The present finding aligns with earlier studies by Fergus and Spada, as well as Starcevic and colleagues, who highlighted cyberchondria

A similarly strong positive relationship was found between cyberchondria and illness perception ($r = 0.54, p < .01$), confirming that cognitive representations of illness play a significant role in shaping online health-seeking behavior. Participants who perceived illnesses as more severe, threatening, and uncontrollable demonstrated greater cyberchondriac tendencies. This finding supports Leventhal's Self-Regulatory Model, which suggests that individuals construct mental representations of illness based on

The multiple regression analysis provided further insight into the relative contribution of the predictive variables. Health anxiety and illness perception together explained 47% of the variance in cyberchondria, indicating that nearly half of the cyberchondriac behavior observed among young adults in the sample can be accounted for by these two psychological factors. Health anxiety emerged as the stronger predictor, suggesting that emotional vulnerability plays a more dominant role in

The demographic profile of the participants further supports the relevance of these findings in the present context. A significant proportion of young adults in the sample reported spending more than four hours daily on the internet, which increases their exposure to online health information. Frequent exposure, combined with pre-From a broader perspective, the findings of the present study have important implications

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content often reinforces catastrophic interpretations. This phenomenon creates a vicious cycle where repeated searching increases anxiety rather than resolving it.

as a digital manifestation of reassurance-seeking behavior driven by maladaptive anxiety patterns.

their beliefs and information exposure, and these representations directly influence coping behaviors. In the context of the digital health environment, individuals with negative illness perceptions may engage in repetitive online health searches in an attempt to reduce uncertainty and regain a sense of control. However, due to the overwhelming and often contradictory nature of online medical information, this strategy tends to intensify emotional distress rather than relieve it.

the development of cyberchondria. However, illness perception also made a significant independent contribution, highlighting that cognitive beliefs about illness cannot be overlooked while addressing excessive health-related internet use. These findings confirm that cyberchondria is not merely a consequence of internet exposure but rather a psychologically driven response rooted in both emotional distress and maladaptive cognitive framework.

existing health anxiety and distorted illness beliefs, appears to create a psychological vulnerability toward developing cyberchondriac tendencies. This suggests that the digital environment acts as a reinforcing platform for pre-existing psychological predispositions rather than being the sole cause of cyberchondria.

for understanding mental health challenges in digitally active youth populations. In the

Indian context, where digital penetration is rapidly increasing and medical misinformation is widely circulated through social media and online platforms, young adults may be particularly susceptible to developing anxiety-related digital behaviors. The study highlights the need for psychological interventions that address not only emotional distress but also cognitive restructuring of distorted illness beliefs.

Furthermore, the study contributes to the theoretical understanding of cyberchondria by empirically integrating both health anxiety and illness perception into a single explanatory model. This strengthens the conceptualization of cyberchondria as a multidimensional construct involving emotional distress, cognitive distortion, and maladaptive coping behavior. The findings suggest that interventions aimed at reducing cyberchondria should focus on improving emotional regulation, enhancing tolerance of uncertainty, and modifying maladaptive illness representations rather than simply advising individuals to reduce internet usage. In sum, the present study provides a clearer psychological explanation of why some young adults become excessively dependent on online health information. The findings indicate that cyberchondria is a reflection of deeper psychological vulnerabilities and cognitive misinterpretations of illness,

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amplified within a digital information environment. By addressing these vulnerabilities through targeted mental health and digital literacy interventions, it may be possible to reduce the growing burden of cyberchondria among young populations.

Conclusion:

The present study concludes that cyberchondria among young adults is significantly influenced by both health anxiety and illness perception, indicating that excessive online health searching is strongly rooted in emotional vulnerability and maladaptive cognitive interpretations of illness. These findings carry important implications for mental health professionals and educational institutions, as they highlight the need to integrate digital health literacy programs and cognitive-behavioral interventions to reduce anxiety-driven online health behaviors in young populations. However, the study is limited by its cross-sectional design, reliance on self-report measures, and a sample restricted to urban university students, which may limit causal interpretation and generalizability of results. Future research should employ longitudinal and experimental designs, include more diverse populations, and explore intervention strategies aimed at modifying illness perceptions and managing health anxiety in digitally active youth.

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