Cognitive Distortions for Patients with Diabetes: Changing "Stinkin’ Thinkin'" to "Smart Diabetes Thinking"

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I am a licensed Clinical Psychologist and Certified Diabetes Educator. I see children, adolescents, adults, and seniors in my private practice in Baldwin, New York where I specialize treating the emotional issues of patients with diabetes, utilizing a cognitive-behavioral orientation. In addition to discussing issues of diabetes self-management, therapy focuses on processing feelings of denial, anxiety, depression, anger, frustration, guilt, and diabetes-specific stress regarding adjustment to this chronic illness.

Cognitive Behavior Therapy

Dr. Aaron T. Beck formulated the basic theory of Cognitive Behavior Therapy (CBT) - the way a person perceives an event, situation, or another person, influences how that person will react to it and how he/she will feel about it. Negative reactions can stem from distorted thinking. Beck called these cognitive distortions or errors in thinking that negatively skew the way in which a person sees the world, themselves and others. CBT involves identifying the distorted, maladaptive patterns of thinking and behaviors, challenging them, and replacing them with more rational, reasonable and adaptive ways of thinking and acting.

A study which investigated "The impact of cognitive distortions, stress, and adherence on metabolic control in youths with type 1 diabetes" was published by SP Farrell, AA Hains, WH Davies, P Smith and E Parton in 2004 in the Journal of Adolescent Health. Their results indicated that higher levels of negative cognitive distortions were associated with more stress (both diabetes-specific and general). Higher levels of general stress led to less adherent behavior and subsequently poorer metabolic control. More diabetes-specific stress also led to poorer metabolic control, as well as general stress. Their findings indicated an indirect role of negative cognitive distortions in metabolic control. They concluded that rather than a direct link between cognitive distortions and adherence behavior, there is an indirect relationship which may exist through stress.

In my practice, I've adapted cognitive-behavioral strategies to help my patients with diabetes to identify their negative thoughts and actions regarding their diabetes and self-management, and then modify them with more realistic, constructive thoughts and actions. I've listed the definitions of eight cognitive distortions below followed by eight statements of "stinkin' thinkin’ " and the corresponding "smart diabetes thinking."
Cognitive Distortions

1- Mental Filter - When you pick out a single negative detail and dwell on it exclusively, missing the "big picture".

Stinkin' thinkin': "My blood glucose after dinner was over 200mg/dL" (Worry, worry.)
Smart diabetes thinking: "In general ('the big picture'), I am able to keep my blood glucose within my target range after dinner, and my A1C stays below 7.0%.

2- "Must" Statements - When you motivate yourself with "musts", the emotional consequence is guilt.

Stinkin' thinkin': "I must exercise for one hour every day, or else I'm a bad Person With Diabetes.
Smart diabetes thinking: "I will try to make time to exercise every day. I will do the best that I can and be proud of what I can do."

3- All-or-Nothing Thinking - When you see things in black or white categories, without shades of gray.

Stinkin' thinkin': "I need to keep my blood glucose perfect."
Smart diabetes thinking: "I try to keep my blood glucose within my target range and feel good about successful control."

4- The Fortune-Teller Error - When you anticipate that things will turn out badly, and you feel convinced that your predictions are an already established fact.

Stinkin' thinkin': "I know my A1C will be too high, because it always is."
Smart diabetes thinking: "I will wait and see what my A1C is, and try not to predict what it will be."

5- Mind Reading - When you make a conclusion, without any facts, that someone is reacting negatively to you.

Stinkin' thinkin': "My doctor thinks I don't care about my diabetes self-management and he doesn't like me."
Smart diabetes thinking: "It doesn't matter if my doctor likes me. I need to communicate with my doctor that I care about my diabetes self-management."

6- "Should" Statements - When you direct "should" and "shouldn't" statements towards others, you feel anger, frustration, and resentment.

Stinkin' thinkin': "My family should not eat ice cream in front of me. I feel angry that I can't have any."
Smart diabetes thinking: "My family can eat ice cream in front of me. They have a right to eat and enjoy. I don't have to feel angry because I can choose to eat a little also."
7- **Labeling and Mislabling** - When you describe an error you made and attach a negative label to yourself.

*Stinkin' thinkin'*: "I forgot to take my medication, *once*. I'm such a dope!"

*Smart diabetes thinking*: "I forgot to take my medication *once*. Everybody forgets things once in a while. I'm only human."

8- **Overgeneralization** - When you see a single negative event as a never-ending pattern.

*Stinkin' thinkin'*: "I forgot to take my medication, *once*. I'm sure I must have Alzheimer's disease."

*Smart diabetes thinking*: "I forgot to take my medication *once*. It doesn't mean that I have Alzheimer's disease."

**Empowered Patients with Diabetes**

Cognitive distortions are at the core of CBT. By teaching my patients with diabetes to correctly identify "stinkin' thinkin'" (aka cognitive distortions), they can then challenge their negative thoughts and change their thinking to rational, "smart diabetes thinking." The benefit of utilizing cognitive-behavioral strategies with my patients with diabetes is improvement of their attitude toward diabetes as well as their self-management. Patients report reduced feelings of depression, anxiety, anger, frustration, guilt and diabetes-specific stress as a result of therapy. Along with improved thoughts and actions, my patients feel empowered to take control of their diabetes and not let diabetes take control of them!

On a personal note, I also have type 1 diabetes and have lived successfully with it for 39 years. To learn more about me and the work that I do, please visit my website at [www.AskDrBev.com](http://www.AskDrBev.com).