The Effects of Anger on the Brain and Body

LaVelle Hendricks, EdD
Assistant Professor of Counseling
Department of Psychology, Counseling, and Special Education
Texas A&M University-Commerce
Commerce, TX

Sam Bore, PhD
Assistant Professor of Psychology and Counseling
Tarleton State University
Stephenville, TX

Dean Aslinia, PhD
Assistant Professor of Counseling
Department of Psychology, Counseling, and Special Education
Texas A&M University-Commerce
Commerce, TX

Guy Morriss
Assistant to the Athletic Director/Former Head Football Coach
Texas A&M University-Commerce
Commerce, TX

Abstract

Anger is described as an intense feeling in response to feeling frustrated, hurt, disappointed, or threatened. Anger contains both advantages and disadvantages. Platt states that benefits of anger include overcoming fears and building confidence to respond to danger or threats which leads to the fight or flight response while disadvantages of anger consist of excess anger serving as a numbing agent emotionally and cognitively. He indicates that a failure to recognize and understand our levels of anger leads to problems (2005). Additionally, research has shown that anger is correlated with heart disease (Kam, 2009). This article examines the causes of anger and the impact of anger on the brain and body. Anger management techniques are also discussed.
What Causes Anger?

Clinched fists, grinding teeth, increased heart rate. Are these the signs of an intense physical workout session or someone experiencing a heart attack or stroke? They could very well be the signs of all three. However, these are just a few of the physiological signs of someone experiencing anger. Anger is a common human emotion. It is a strong emotion often caused by some form of wrong-doing, ill-treatment or unfairness. We experience the feeling of anger when we think we have been mistreated, injured or when we are faced with problems that keeps us from getting what we want or attaining our personal goals. Anger, according to the cognitive behavior theory, is attributed to several factors such as:

- Past experiences
- Behavior learned from others
- Genetic predispositions
- Lack of problem solving ability (Loo, 2005, para. 1).

We all experience it, some more often than we like to admit. Experiencing anger varies from person to person and not everyone handles anger in the same way. There are individuals who anger very easily and then there are those who rarely display anger. Some people are conscious of their anger and know how to control it and deal with it. Conversely, there are others who fail to recognize the signs of anger and find themselves in an uncomfortable and often unpleasant situation.

According to Dr. Harry Mills, anger is not an emotion that we are born with, rather one that is learned (2005). We learn how to become angry in multiple ways. As children we learn by copying the behavior of people around us. For example, growing up in a home where fighting and arguing is a constant engagement can cause a child to learn that this behavior is normal and demeaning and scolding others without reason is acceptable. The child may grow up unaware that they have an anger problem. These children may grow up to be aggressive and hostile towards their peers and others. This learned behavior may lead to a child becoming a bully. Bullying is the act of repeated aggressive behavior done intentionally to hurt another individual physically or emotionally. Bullies behave in this aggressive, abusive manner because it gives them a sense of power over others. Once they bully someone, they find that others respect them or fear them for their hostile behavior. The child tends to become more aggressive in their behavior because they have learned that their actions make them popular (“Bullying,” n.d.). Ironically, the victims of bullying also learn to be angry when they are continuously the target of this aggressive and abusive behavior. Their anger and desire for revenge builds up causing them to develop their own anger issues. They become aggressive and seek revenge on not just the person who abused them but others as well. The victim now becomes the bully.

Bullying is not necessarily restricted to children and adolescents. Adults are also victims of bullying. It can take place at home, at school, and in the workplace. Adults with anger issues will target their family, friends, co-workers, and even strangers. They take out their anger on others, wanting someone else to feel the humiliation and abuse that they have had to endure; they want someone else to experience the pain, whether physical, mental, or verbal (“Bullying,” n.d.).
The average adult experiences anger about once a day and becomes annoyed or peeved about three times a day (Mills, 2005). Is there a difference between annoyed, peeved, or angry? The difference is between feeling mildly angry and extremely angry. Annoyed means “to cause slight irritation to another by troublesome, often repeated acts” (“Annoyed,” 2013, para. 1). To be peeved simply means “to cause to be annoyed or resentful” (“Peeved,” 2013, para. 1). On the other hand, angry means to feel extremely annoyed or to express extreme annoyance such as being “incensed or enraged” (“Angry,” 2013, para. 1).

According to Loo (2005), an experienced negotiator and an expert in conflict resolution, there are two sources of anger: an internal source and an external source. The internal source of anger stems from irrational perceptions of reality and low frustration point. Psychologists have identified four types of thinking that lead to internal sources of anger:

- **Emotional reasoning:** people, who reason emotionally, often misinterpret normal event and things that other people say as a direct threat against their needs and goals. Emotional reasoning individuals often become irritated at innocent things other people tell them. They perceive these things as attacks on themselves.
- **Low frustration tolerance:** everyone at some point experience low tolerance for frustration. Stress-related anxiety tends to lower our tolerance for frustration which then causes us to see normal things as threats to ourselves.
- **Unreasonable expectations:** people sometimes make demands without knowing the reality of the situation. Unable to have things go their way or have others act a certain way, lowers the tolerance for frustration and causes people to get frustrated and angry.
- **People-rating:** this anger-causing type of thinking triggers derogatory labeling on other people. This type of thinking dehumanizes and makes it easier for people to become angry at other people. (Loo, 2005, para. 4)

As for external sources, psychologists have come up with hundreds of events which cause people to get angry. They have narrowed them down to the following four events:

- People make personal attacks against other people in the form of verbal abuse.
- People attack other people’s ideas and opinions by cutting these ideas and opinions down.
- People threaten other people’s basic needs – work, life, family, etc.
- People’s level of tolerance for frustration decreases due to environmental factors in their lives. (Loo, 2005, para. 5)

It is plain to see that low tolerance levels of frustration factor into both internal and external sources of anger. Recognizing these factors may help us deal with our anger and help resolve our anger issues. The following four factors that we deal with on a daily basis, which cause our frustration tolerance levels to decrease are:

- **Stress/Anxiety**
- **Pain-physical and emotional**
- **Drugs/Alcohol**
- **Recent irritations-“having a bad day”**
We encounter stress and anxiety in our daily lives, whether it is at work, home, school, or during the drive home. Our stress levels increase which can cause our tolerance for frustration to decrease. This affects adults, adolescents and children. The stress we experience at work and school often carries over into our homes which then affect our families. Even the drive home can lead to increased levels of stress and anxiety. The bumper to bumper traffic, the driver who almost ran you off the road; you arrive home and your spouse has complaint after complaint about the children not wanting to do their homework, their constant fighting which can lead you to scream and wave your arms in the air in frustration. You have completely lost control of frustration tolerance. What has occurred is that you encompassed your frustrations from work and your drive with the issues at home. Stress and anxiety of this nature is a factor that increases domestic disputes and child abuse.

Experiencing physical and emotional pain lowers our frustration tolerance considerably. Our pain becomes the center of our attention. We close ourselves off to others and everything else around us. Our need to survive becomes our main focus. Exploring strategies to survive often lead us to drugs and alcohol abuse. Drugs and alcohol can cause misinterpretation of information and actions which can lead a person to become irritable and angry. It can also trigger suppressed emotions and memories to come forward which can lead to an uncomfortable situation and often intense anger. A person under the influence of drugs and/or alcohol will say and do things without thinking of how others will be affected. Anger can affect a person the same way as drugs and alcohol by preventing logical and rational thinking.

We do not have to be on drugs or alcohol or be experiencing stress and anxiety to “have a bad day.” Recent irritations are the little annoyances that build up throughout the day that lower our level of tolerance for frustration. Such annoyances can include walking out of the house on your way to work and discovering a flat tire. These irritations will build up and by the end of the day you no longer have any tolerance for any more frustrations. The next little provocation can result into full blown anger.

Generally when an individual becomes angry, they experience some form of physiological sign as those mentioned previously. Other common signs of anger include the following:

- A dramatic increase in breathing rate
- Unconscious tensing of muscles, especially in the face and neck
- Sweating, feeling hot or cold
- Shaking in the hands
- Face turning pale or red and veins becoming visible due to an increase in blood pressure
- Goosebumps
- A release of adrenaline into the body creating a surge of power. (Loo, 2005, para. 7)

Experiencing anger is not a bad thing. It is one of the most primitive defense mechanisms we have. The effects of anger can be positive and negative. It helps protect and motivate us from being mistreated or taken advantage of. For example, after years of living in an abusive relationship, your anger reaches the point to motivate you to leave and save you from further abuse. However, if you use your anger to control others and have them fear you, then, as previously discussed, you become the abuser or the bully.
By being aware and being able to recognize the physiological signs of anger, we can take hold of our emotions before our level of anger gets out of control (Loo, 2005). Showing aggression and anger is not an acceptable reaction in today’s society, especially in the workplace or public environments. An outburst of anger or aggressive behavior towards your employer can get you fired at work. Chasing after the driver who cut you off in traffic can lead to serious consequences which include jail time or lead to someone being physically hurt.

How Anger Impacts the Brain

Anger is a primary human emotion we all experience from time to time. We feel anger when we feel threatened due to physical conflict, injustice, humiliation or betrayal. The human brain is setup with a scanning device that recognizes anything that is threatening. It then signals to our body how to react. How we react when we become angry can be crucial to the outcome of the situation.

The expression of anger can be through active or passive behaviors. In the case of ‘active’ emotion, the angry person ‘lashes out’ verbally or physically at an intended target. When anger is a ‘passive’ emotion, it is characterized by silent sulking, passive-aggressiveness behavior (hostility) and tension. (Addotta, 2006, para. 10)

Numerous studies have been conducted on how anger impacts us physiologically and psychologically. These studies have all revealed that before anger affects any part of our body, it has to affect our brain first. The brain is our internal alarm system. It signals to the rest of our body when we are happy, sad, angry, in pain, etc. this alarm system within our brain triggers the release of adrenaline which causes us to heighten our awareness and responsiveness. This causes glucose to gush through our blood stream and muscles giving us the ability to respond faster, run faster, and make quicker decisions.

The brain processes all emotional stress. When the brain senses threat or harm, millions of nerve fibers within our brain release chemicals throughout the body to every organ. When a person experiences anger the brain causes the body to release stress hormones, adrenaline and noradrenaline. These chemicals help the body control the heart rate and blood pressure. The release of these chemicals also helps regulate the pancreas which controls the sugar balance in our blood (Boerma, 2007).

Studies conducted at the Hotchkiss Brain Institute in Calgary, have found that one way anger affects the brain is by compromising the neurons in the hypothalamus, the brain’s command center for stress responses. “Normally these neurons receive different chemical signals that prompt them to switch on or off. Stress and anger compromise these functions and jeopardize the brain’s ability to slow down” (“Effects of Anger,” 2008, para. 20). Also, when we get angry, the muscles in our body tense up. The anger causes neurotransmitter chemicals in the brain, called catecholamines, to flow through our body giving us a burst of energy that can last for several minutes. This then triggers reaction to other parts of the body such as increased heart rate, heightened blood pressure and intensified breathing (Addotta, 2006).

The brain serves as the control center for our body. According to Addotta (2006), anger comes from the reptilian part of our body known as the amygdala. The amygdala is an almond-
shaped structure located just above the hypothalamus gland of the brain. We have two amygdala situated just a few inches from each ear. Consisting of several nerves that connect to various parts of the brain such as the neocortex and the visual cortex, the amygdala forms an important part of our nervous system.

The progression of anger to rage is normally stopped before getting out of control. When the amygdala initiates the emotion of anger, the prefrontal cortex can result in violent behavior. According to the Society for Neuroscience (2007), studies done at the University of California in San Diego are helping scientists get a better idea as to what is going on in the brain of adolescent teenagers who display inappropriate anger and aggression when they feel threatened. These findings indicate that this hostile, aggressive behavior is linked to a hyperactive response in the amygdala and to lessening activity in the prefrontal cortex of the brain.

In an article published by Science News, a woman had her amygdala surgically removed in order to help her control her epileptic seizures (Bower, 1997). Upon recovery, her doctors found the surgery was a success in treating her seizures, however, they also discovered that by removing the amygdala, it eliminated her ability to perceive signs of anger and fear in other’s voices. Several studies done after the woman’s surgery indicated she had difficulty in understanding vocal intonations when emotions such as fear and anger were expressed. She was, however, able to recognize and understand expressions of sadness, happiness, disgust, and surprise (Bower, 1997).

The amygdala is an excellent indicator of threats. Its main purpose is emotional and social processing. We are able to react to the threat before the prefrontal cortex, which is responsible for the brain’s thoughts and judgments, is able to assess the rationality of the reaction. In other words, the amygdala causes the brain to react to the threat or fear before the prefrontal cortex can consider the consequences.

Resilient people are able to make rapid recoveries from stress, with their prefrontal cortex working to calm the amygdala, which is the remnant of our reptilian emotional brain, the brain that cannot negotiate itself out of an emotional rut; instead it floods the body with a cascade of cortisol or stress hormones. (“Effects of Anger,” 2008, para. 18)

It is clear to see that our brain is just as capable of getting us riled up for “flight or fight” as it is of calming us down. However, some people anger much quicker and may take longer to calm down. If this is the case, minor irritation can re-trigger someone to full blown anger within a shorter period of time. Professionals in the science and medical field have long known that the brain chemical serotonin has made an impact on regulating anger and aggression. Scientists have found people experiencing aggressive behavior maintain lower levels of serotonin as compared to those with non-aggressive behavior. According to Dr. Sietse de Boer of the University of Groningen, “serotonin deficiency appears to be related to pathological, violent forms of aggressiveness, but not to the normal aggressive behavior that animals and humans use to adapt to everyday survival” (as cited in Society for Neuroscience, 2007, para. 19).

Despite the numerous studies done on anger, it is still an emotion that is very misunderstood. We know what causes anger and we know what anger can cause. But is anger good for us or is it bad? We know anger is a powerful emotion which can be destructive as well as productive. When handled properly, anger can motivate positive actions and outcomes. For example, Dr. Martin Luther King, Jr. recognized the injustices toward the African American
population and focused his anger at these injustices toward a positive outcome. He fought for civil rights without showing aggression or hostility. On the other hand, the repression of anger can lead to serious destruction such as that of the Columbine shootings in Columbine, Colorado in 1999. The two high school students who went on a shooting rampage at their high school exhibited signs of severe anger issues. So severe that it cost several innocent people their lives.

Knowing what psychological signs to look for in a person with anger problems is important. Also, knowing that anger can be a survival tool and a source of energy that can be healthy or unhealthy can be beneficial. Prolonged anger and repressed anger are both unhealthy. Before we feel anger, we feel a primary emotion. The primary emotion can be feeling of fear, offense, disrespect, force, entrapment or pressure. When the primary emotions become too intense, then we experience the secondary emotion of anger.

Studies show that repressed anger can be harmful to our body and to our mind. Not everyone knows how to manage their anger or how to express it. Holding back anger can lead to mental illnesses including depression. One way of looking at depression is as anger turned inward. An emotion such as anger will not go away if ignored. It will only get stronger and can cause severe problems. Studies indicate that angry and aggressive behavior that goes unchecked can eventually cause changes to the brain that will decrease the production of serotonin and increase the chances of angry and aggressive behavior (Society for Neuroscience, 2007).

Not everyone is comfortable dealing with anger. Although, it is one emotion that men consider acceptable to display. As young boys, they are taught that certain emotions are not acceptable, like crying. So instead of crying, young boys will hide their shame or pain and often redirect it as anger. Studies have found that men will often display anger when in fact they are experiencing depression and/or fear. Research has found that boys who are wounded as youth will often grow up to be wounded men. They are likely to pass on the anger they are experiencing to those closest to them (Johnson, 1998).

Although depression and anger may seem like opposites, the primary emotion is the same. Angry people are stressed and uptight. They are often overbearing and commanding. People who are depressed become shut-off from others. They are unresponsive to what is happening around them. Despite their opposites, both anger and depression are initiated in the brain. Experiencing anger and depression starts in the brain with a chemical imbalance that leads people to either hold in or lash out their emotions.

Women are just as likely to demonstrate anger as men. However, in some cultures it is not acceptable for women to display anger. Women are expected to conceal their anger; sometimes they conceal it so well that they fail to recognize it in themselves (Marano, 2003). In 1995, a study on anger and violence was done by the Department of Justice that found no evidence that men are angrier than women. The study did show differences in how men and women express their anger. Researchers found that “women tend to be more subtle in their display of anger, and as a society, we pay more attention to the testosterone-driven display of aggression by men” (Johnson, 1998, para. 5). Many believe that the only way we can deal with our anger is by recognizing we are angry rather than trying to hide it. However, because anger is considered as an unacceptable emotion, little is being done to deal with it. Anger is an emotion that will haunt us for a very long time unless we learn to control it. In order to control anger, we must learn how to express it appropriately. There are several things we can do to get started on the road to learning how to express and control this emotion. The first step is to recognize that
we are angry and then figure out what made us angry. Talking to someone about it helps relieve some of the tension and stress brought on by feeling angry.

Prolonged and repressed anger is something we, as human beings have learned to live with. Unlike animals whose response to fear is to scare away the attacker, we as humans become the attacker by using our anger to scare away those we love and care for. Holding in our anger can be just as bad as lashing out with our anger. Both can lead to serious consequences. These include heart attacks, hardening of the arteries, strokes, hypertension, high blood pressure, changes in heart rate, and metabolism and muscle and respiratory problems (“Anger,” n.d.).

How Anger Impacts the Body

The average heart rate of a person is 80 beats per minute. However, anger can make our heart rate rise to 180 beats per minute. Anger has the same effect on our blood pressure. Experiencing anger can cause an average blood pressure of 120 over 80 to jump to 220 over 130 or higher causing a possible heart attack or stroke. People who are constantly angry have a higher risk of suffering a heart attack or stroke. When we become angry or stressed, our body releases chemicals that clot the blood. These blood clots can create serious health problems. The clots can travel up the blood vessels to the brain or heart causing a stroke or heart attack, both of which can be fatal (Boerma, 2007).

We do not have to experience uncontrollable anger in order for this emotion to have an impact on our body. When fear is the trigger to our anger, a multitude of responses affect our body. It can almost be described as the “domino effect.” First, whatever it is that caused the fear that lead to anger causes our stress hormones, adrenaline and noradrenaline, to surge through our body. This causes an increased hear rate and blood pressure. Secondly, the muscles that are needed to fight or flee become tense and uptight. This can lead to tension headaches, migraines or insomnia (Boerma, 2007). Thirdly, our breathing becomes more rapid because it is trying to get more oxygen to our brain. Anger can also impact circulation, so if there is not enough oxygen flowing to the brain, this can cause chest pains and even cause an artery to burst resulting in a stroke.

In a review of findings based on 44 studies published in 2009 in the Journal of the American College of Cardiology, evidence was found that supports the connection between anger and hostility being significantly associated with heart disease. The studies also show that adults with no history of heart disease, but who suffer from chronic anger are 19% more likely to develop heart problems as compared to those who rarely experience these personality traits (Kam, 2009). The same review showed that anger does more harm to men’s hearts that to women’s. Based on the results from these reviews, researchers suggest that the buildup of stress responses in daily life might have a greater impact on men than women. They suggest that women may not experience the same stress and pressures that men do on a daily basis (Kam, 2009). Men have the responsibilities of providing for their families and often are the sole wage earner in the home. Men are also prone to experience more anger and hostility that women. Women tend to hide and suppress their anger. They are not as vocal or aggressive as men can be.

According to Dr. Johan Denollet from CoRPS Researcher Center at Ilburg University in the Netherlands, psychological factors do make an impact on the development and progression of coronary heart disease. Clinicians should take symptoms of anger and hostility seriously, and
may consider referring their patient for behavioral intervention. Patients need to be closely monitored and studied for these personality traits in order for clinicians to do a better job identifying high-risk patients who are more liable to future fatal and non-fatal coronary events (as cited in Kam, 2009).

As a result of these finds, more doctors are now considering anger as a risk factor for heart disease. They are treating it as a risk factor that can be modified just as lowering cholesterol or blood pressure. According to Dr. Holly S. Anderson, cardiologist and direct of education and outreach at the Ronald O. Perelman Heart Institute at New York Presbyterian Hospital/Weill Cornel Medical Center, doctors are really effective at treating heart attacks, but not too effective at preventing them. Dr. Anderson says, “Stress is not easy to measure as your cholesterol level or your blood pressure, which are clearly objective. But it’s really important that physicians start taking care of the whole person, including their moods and their lives, because it matters” (as cited in Kam, 2009, para. 9).

People who have serious anger problem frequently exhibit aggressive and hostile behavior and attitudes towards others. These individuals have been described as having “Type A” personalities. Those who have more laid back personalities are described as having “Type B” personalities. Doctors Meyer Friedmand and Ray Rosenman came up with these categories in the late 1950s. Their inspiration for developing these categories was to be able to tell which patients were at a higher risk of developing heart disease from those who were not (Mills, 2005). Friedman and Rosenman classified people who were quick to anger and demonstrate explosive reactivity, competitiveness, impatience, irritability, and hostility as having “Type A” personalities. They classified people with “Type A” personalities as being more likely to display aggressive and competitive personality traits and to achieve great professional success. Unlike the people with “Type A” personalities, individuals with “Type B” personalities have a more easygoing attitude towards life.

There are positive qualities of people with “Type A” personalities. People with “Type A” personalities are often very driven and determined to succeed. They work hard and strive to reach their goals. However, because of their driven focus, people with “Type A” personalities are always in a hurry and are impatient. They often neglect others due to being busy doing something else trying to get ahead. People with “Type A” personalities can be critical and judgmental of others; especially those they feel are less competent. “Type A” personalities tend to focus on the weaknesses of others (Mills, 2005).

There has not been much change in the categorization of “Type A” and “Type B” personalities since their developments. Another important factor to look at with these types of personalities is how they affect people physiologically. Studies have found that men with “Type A” personalities who have high levels of hostility show weaker parasympathetic nervous system (PNS) responses than men with “Type B” personalities. Unlike the parasympathetic nervous system which is the part of the body’s nervous system which purpose is to calm people won, the sympathetic nervous system (SNS) causes arousal and invokes heavy anger responses by overflowing the body with stress hormones, adrenaline and noradrenaline (Mills, 2005). The hormone acetylcholine is released by the parasympathetic nervous system in an attempt to stop the arousal of the emotions of anger. The acetylcholine neutralizes the stress hormones and helps the body to relax and calm down. People with healthy parasympathetic nervous systems are at a less risk of heart disease due to physiological factors such as anger. However, because men with “Type A” personalities tend to have weaker parasympathetic
nervous systems, they are more likely to suffer heart disease due to the repeated arousal of heart rate and increased blood pressure (Mills, 2005).

People who are angry and hostile tend to alienate family and friends. Their harsh behavior negatively affects their jobs, family and relationships with those around them. Anger problems do not disappear by lashing out at others. Venting anger and frustration with words or actions often make the situation much worse, especially for those who are in the immediate path of the attack. Research has proven that having a strong, healthy support system with family, friends and co-workers is crucial to maintaining your health. Establishing a positive social support helps us deal with emotional problems and major health problems that can be caused by anger (Mills, 2005).

When we experience the psychological effects of anger, we tend to become angrier because of how our body is feeling. The chemical imbalance triggered by anger causes our body’s metabolism to slow down. Feeling stressed and angry initiates excessive eating and weight gain. In addition, stress, as a reaction to anger, provokes our stomach causing it to produce too much acid which makes us candidates for gastric ulcers and acid reflux (Boerma, 2007).

Anger also causes the release of the stress hormone, cortisol. Release of this hormone gives the body bursts of energy. However, too much of this hormone can cause a multitude of negative effects on the body. Too much cortisol in the body can cause an imbalance in blood sugar; it can suppress thyroid function, and decrease bone density. This hormonal imbalance also impacts the body’s immune system. Research shows that chronic-angry people suffer more frequent colds, flu’s infections, asthma, skin disease flare-ups and arthritis, as compared to on-chronic-angry people (Boerma, 2007). Although anger itself does not have a direct physical effect on the body, the way this emotion affects other parts of our body is what causes the problem whether it is increasing our heart or blood pressure or causing the release of stress hormones, anger has a significantly unhealthy impact on our bodies. Evidence from numerous studies prove that people with constant chronic anger, hostility and aggression are at a higher risk of developing heart disease and other health problems than those who anger less often. The studies are clear, the angrier and hostile you are; the more prone you are to heart disease (Mills, 2005).

It is important to recognize the physiological effects of anger especially with all the damage this emotion can cause our body. It is also important to learn how to express anger appropriately and learn healthy and socially respectful methods to express angry feelings. Knowing how to control anger can make a major impact on our relationships, employment and especially on our health. Next time you find yourself getting angry while standing behind the customer with the basket full of groceries at the “10 Items or Less” check-out lane or at the driver who rang you off the road trying to change lanes, remember you may be shortening your life.

How to Manage Anger

As mentioned previously anger can be both harmful and beneficial. The following is a list of minor measures that can make a significant impact on managing anger before it gets out of control:
• Take three deep breaths
• Change your environment
• Know why you feel angry
• Let go of what is beyond your control
• Express yourself
• Be cautious
• Be assertive, not aggressive, in expressing yourself.

Another course of action in helping to control anger is laughing. Studies have found that laughter minimizes the effect of anger on the brain by releasing health protecting hormones that lessen the effects of hormones causing anger. These studies clearly prove that laughter and joy are beneficial to the brain. A helpful technique to involve humor while you’re angry is to ask yourself, “What will be amusing about this when I think about it later. Is it your facial expression? How about someone else’s facial expression? Is it something you or someone else said” (Duncan, 2006, p.20). It is possible to be physically healthy if our brains are free of stress and anger?

Summary

Overall, suppressing anger and over expression of anger can negatively affect significant relationships and lead to bad health, (Duncan, 2009). Accepting that you are angry, seeking to understand what your anger is about, and devising an action plan prevents repressed anger to turn into rage which leads to a complete loss of self-control. Repressed anger is also an underlying cause for both anxiety and depression (Platt, 2005). Managing anger effectively motivates individuals to adopt effective assertive skills and leads to an increase in life expectancy.

References


