

# Obsessive Compulsive Disorder

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## WHAT IS OCD?

Individuals with OCD have disturbing, persistent thoughts that are extremely difficult to dismiss. Over time, these individuals, in order to cope, develop rituals and behaviors to combat or neutralize the obsessive thoughts. They feel compelled to repeat these behaviors over and over in an attempt to relieve the obsessions; however, compulsive behaviors become increasingly less effective and must be constantly elaborated and increased to cope with the obsessive thoughts. The result is that a person with OCD feels consumed by their obsession and its compulsions, often spending hours each day on compulsive habits.

In children, some rituals and obsessive thoughts are normal. Children may want their socks arranged so that the seam is in a certain spot, or their nighttime books read in a certain order. These rituals and fears become a diagnosable problem when they are severe enough to interfere with an individual's daily life, such as attending school, having friends, working at a job. Either the compulsions become very rigid or they consume so much time that they replace or prevent healthy activities.

## SOME FACTS:

One third to one half of adults with OCD experienced symptoms in childhood. OCD often goes undetected because of shame and embarrassment. Average age of onset is 10 yrs of age. Boys are more likely than girls to develop prepubertal symptoms. The incidence of OCD is more common in Caucasians than in African Americans.

## Typical Symptoms of OCD

| Common Obsessive Thoughts  | Common Compulsions   |
|--|--|
| Contamination Fears<br><i>(this includes fears of AIDS or other contagious diseases)</i> | <ol style="list-style-type: none"><li>1. Washing/Throwing out things</li><li>2. Avoiding Public Places</li></ol>   |
| Fear of harm to self or others, or something generally bad happening                     | <ol style="list-style-type: none"><li>1. Avoiding the person who might be harmed</li><li>2. Avoiding being alone</li><li>3. Repeating actions over and over</li><li>4. Checking doors, outlets, stove, ashtrays, weather channels, curling irons, etc.</li></ol> |
| Fear of cancer   | <ol style="list-style-type: none"><li>1. Repeatedly checking one's body or stool</li><li>2. Seeking unnecessary medical tests</li></ol>  |
| Fear of being sinful   | <ol style="list-style-type: none"><li>1. Compulsive need to tell or confess</li><li>2. Seeking reassurance</li><li>3. Praying</li><li>4. Counting</li></ol>  |
| Forbidden thoughts   | <ol style="list-style-type: none"><li>1. Avoidance of many situations that bring up sexual thoughts</li><li>2. Praying</li></ol>   |
| Symmetry urges   | <ol style="list-style-type: none"><li>1. Doing things the same number of times on the right and left sides of the body</li><li>2. Arranging things to be symmetrical</li></ol>   |
| Fear of the future   | <ol style="list-style-type: none"><li>1. Ordering and arranging</li><li>2. Hoarding</li></ol>  |
| Fear of losing "important" information or objects  | <ol style="list-style-type: none"><li>1. Hoarding</li><li>2. Avoiding cleaning out spaces</li></ol>  |

## **TREATMENT**

### ***Psychotherapy***

The symptoms of OCD are as individual as we are. Treatment studies have focused on cognitive-behavioral techniques, as those are the psychotherapeutic techniques that have demonstrated effectiveness with persons diagnosed with OCD. By safely and gradually exposing a person to the feared situation, a trained cognitive-behavioral clinician can help a person function normally again. Treatment is designed to defeat the compulsions, which maintain the problem.

### ***Psychopharmacology***

Many medications can be used to help reduce the severity and frequency of obsessive thoughts. In some cases, the thoughts seem to be eliminated altogether. Individuals can assure the best outcome with a combination of medication and cognitive-behavioral therapy.

### **Recommended Self-Help Books**

*Stop Obsessing* by Edna Foa

*When Once is Not Enough* by Gail Steketee

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