

Obsessive-Compulsive Disorder

Obsessive-compulsive disorder (OCD) is an anxiety disorder that usually begins in adolescence or early adulthood but may begin in childhood. When OCD starts in childhood, it is more common in boys than in girls. The usual time of onset is later for females than males, so the disorder is equally common among adult men and women. Without treatment, OCD usually follows a chronic course, and some persons become severely disabled by it. This Patient Page is based on one published in the October 27, 2004, issue of *JAMA*.

Obsessive-compulsive disorder is characterized by the presence of obsessions or compulsions or (as is often the case) both of them. The obsessions or compulsions cause marked distress, are time-consuming, and interfere with the person's normal functioning.

Obsessions—unwanted, recurrent thoughts, impulses, or images that are experienced as intrusive and inappropriate

- The obsessions of OCD are not just worries about real-life problems.
- The person realizes that the obsessive thoughts are from his or her own mind.
- The person attempts to suppress or neutralize the obsessions with actions or other thoughts.
- Examples of typical obsessions include thoughts of being contaminated by dirt or germs or thoughts of having hurt someone, even though recognizing that such concerns are not realistic.

Compulsions—repetitive behaviors or “rituals” that the person feels driven to perform in a particular way

- The compulsive actions are done to reduce distress or to prevent something bad from happening, even though there is no realistic connection with preventing such an occurrence.
- Typical compulsions include excessive cleaning (such as hand washing), repetitive checking, and hoarding of useless items.
- Mental acts such as praying, counting, or repeating words silently can be compulsions for some persons.

CAUSES OF OCD

- The exact cause of OCD is not known.
- There is evidence that OCD can run in families and may have a **genetic** (inherited) component.
- An imbalance of **serotonin**, a chemical messenger in the brain, may be involved.

TREATMENTS FOR OCD

- **Selective serotonin reuptake inhibitors (SSRIs)** are medications that have been shown to successfully reduce the symptoms of OCD and that are also used as antidepressants.
- **Cognitive behavioral therapy (CBT)** for OCD involves helping patients to change their ideas or thought patterns related to obsessive thoughts and compulsions.
- **Exposure and response prevention** is a behavioral therapy that may be included as part of CBT. The patient is deliberately exposed to situations that tend to stimulate his or her compulsions (for example, getting his or her hands dirty). A trained therapist helps the patient deal with the resulting anxiety while encouraging him or her not to engage in the compulsion (for example, excessive hand washing).

FOR MORE INFORMATION

- Anxiety Disorders Association of America
240/485-1001
www.adaa.org
- American Psychiatric Association
703/907-7300
www.healthyminds.org
- National Institute of Mental Health
866/615-6464
www.nimh.nih.gov

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Sources: Anxiety Disorders Association of America, American Psychiatric Association, National Institute of Mental Health

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