Obsessive Compulsive Disorder (OCD)

Obsessive compulsive behavior is an anxiety disorder. The patient is constantly troubled by ideas that stay in the mind that cannot be ignored (*obsessions*). These troubling and sometimes bizarre thoughts compel one to behave in an unreasonable way. The patient will carry out repetitive, ritualistic acts (*compulsions*) to reduce anxiety.

CAUSE

The cause of obsessive compulsive disorder (OCD) is not known. Scientists do know it runs in families. Men begin experiencing it in the teenage years. Women usually begin getting problems (*symptoms*) in their early 20's. Some studies have shown that the functioning of parts of the brain are different in those with OCD. The disorder may be closely associated with depression.

SYMPTOMS

Persons with OCD recognize that their obsessions or compulsions prevent them from living a normal life. They commonly describe their behavior as foolish or pointless. But they cannot change it. Persons with OCD usually feel that their thoughts or obsessions are strange. They do not understand why they are having them. Sometimes the thoughts have to do with a fear that something terrible will happen or that they will do something terrible. Persons with OCD may spend hours each day performing senseless compulsive acts. The amount of time spent is less important than the degree of disruption caused in everyday life.

EXAMPLES OF TYPICAL RITUALS

- **Cleaning.** Fearing germs, a person may shower repeatedly throughout the entire day or wash his or her hands until they bleed.
- **Repeating.** To dispel anxiety, a person may repeat a name or phrase many times.
- **Completing.** A person may perform a series of complicated steps in an exact order or repeat them until they are done perfectly.
- **Checking.** A person may check things over and over to make sure a task has been completed. For example, repeatedly checking to see if the door is locked or the toaster is unplugged.
- **Hoarding.** A person may constantly collect useless items that he or she repeatedly counts and stacks.
- People with OCD may have emotional symptoms associated with depression. This may include guilt, low self-esteem, anxiety, and extreme fatigue. Many of these emotional problems are a result of the frustration brought on by an obsessive-compulsive problem.
- Obsessive compulsive symptoms will often create problems in relationships.
- In extreme cases, people with OCD become totally disabled, have no friends, and are unable to leave home surroundings. They spend the day performing rituals or having obsessive thoughts.

DIAGNOSIS

There is no laboratory test for OCD. It is diagnosed by your caregiver talking with you and someone close to you about your symptoms. Your caregiver will ask very specific questions about the type of obsessions or compulsions you have.

- Your caregiver may diagnose obsessive compulsive disorder if your obsessions or compulsions:
  - Cause you distress.
  - Take more than an hour of your time per day.
  - Interfere with your normal routine, occupation, social activities, or relationships with others.

YOUR CAREGIVER MAY ASK YOU SUCH QUESTIONS AS:

- Do you have troubling thoughts that you cannot dispel regardless of how hard you try?
- Do you keep things extremely clean and wash your hands more than other people you know?
- Do you check things over and over, even though you know that the oven has been turned off or that the front door is locked?

TREATMENT

A combination of antidepressant or anti-anxiety drugs and behavior therapy has been most helpful in treating the disorder. Clomipramine (Anafranil) is often used in the treatment of OCD. Some drugs like Prozac, Zoloft, Paxil, and Luvox have been used with positive results. In very rare cases, neurosurgery is performed. OCD is not obsession about life's normal worries. Your caregiver will have to make sure that a medication or drug is not adding to your symptoms. Phobias and longstanding (*chronic*) depression can also occur along with OCD.

HOW LONG WILL THE EFFECTS OF OBSESSIVE-COMPULSIVE DISORDER LAST?

Obsessive compulsive disorder usually appears in the late teens and early twenties. The disorder may last a lifetime without treatment. It may become less severe from time to time, but never quite goes away. You may become free of your symptoms for years before having a relapse. **Developments in behavior therapy and new medications are helping many people with OCD live productive lives.**

HOME CARE INSTRUCTIONS

- Include your family in your therapy. You and your family may benefit from reading books, studying OCD, and attending support groups.
- Take your medication as ordered by your caregiver.
- Do not miss your behavioral therapy sessions.
- Know that you are not alone. There are millions of people affected by OCD. There are national organizations devoted to helping people with this disorder.

SEEK IMMEDIATE MEDICAL CARE IF:

You feel that any of your ideas or actions are slipping out of your control.

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