

Obsessivecompulsive disorders



Don't think of a flying pig. Whatever you do, just don't think of a flying pig. Difficult now that we've suggested it, isn't it? It is almost impossible to suppress a thought or image once it has been suggested.

Researchers strongly suspect that imbalances in one or more of the brain's chemical systems that regulate repetitive behaviours may be related to the cause of obsessive-compulsive disorder (OCD). This biological predisposition may be inherited, and triggered by psychological and environmental factors such as stress.

Signs and symptoms of OCD

People with OCD are trapped in a pattern of repetitive unwanted, disturbing thoughts, images or urges (obsessions) and/or behaviours (compulsions) that are aimed at avoiding these thoughts and reducing the associated anxiety.

Often suffers know that these thoughts, images, or urges are completely nonsensical, but they are unable to control them. They usually go to great lengths to hide their problem from family, friends, and co-workers.

Other signs to look out for include:

- Large blocks of unexplained time.
- Persistent absence from work or school.
- Repetitive behaviour.
- Constant questioning and need for reassurance.
- Simple tasks consistently taking longer than usual.
- Perpetual lateness.
- Increased concern over little things and details.
- Extreme emotional reactions to small things.
- Inability to sleep properly.
- Staying up late to get things done.
- Change in eating habits.
- Avoidance of certain things or situations.
- Daily life becomes a struggle.

It is also not unusual for people with OCD to have the following symptoms or co-occurring disorders:

- Depression, intense anxiety, discomfort, or disgust.
- Severe or extreme nail biting.
- Trichotillomania (compulsive hair pulling or plucking).

- Body dysmorphic disorder (preoccupation with a minor or imagined bodily defect).
- Hypochondriasis (the unfounded fear of having a serious illness).

It's normal to have occasional intrusive and horrific thoughts and sometimes, particularly when we are stressed, engage in ritualistic behaviour, but this doesn't mean you have OCD.

What distinguishes OCD from perfectionism or the occasional intrusive thought or normal ritual is the marked fear and anxiety about the possibility of having additional intrusive thoughts. Furthermore, the compulsions must take up a significant amount of time, and interfere with daily life.

Treatment

OCD is most successfully treated with a combination of medication and highly structured therapy.

The most effective medications seem to be those that inhibit the reuptake of serotonin, which helps up to 60% of people with OCD. However, studies suggest that the treatment gain is moderate at best, and that relapse is likely once medication is discontinued.

The most effect therapy is cognitive-behavioural therapy, which is aimed at actively preventing the rituals and systematically and gradually exposing the person to the feared thoughts or situations. This technique is called exposure and response prevention.

It can be devastating to be enslaved by rituals and riddled with anxiety about what might happen if you don't perform them. If you are powerlessly succumbing to obsessions and/or compulsions, and they are interfering with your daily life, seek help. Treatment can help you regain control and reclaim your life.