

Obsessive-Compulsive Disorder

Obsessive-Compulsive Disorder (OCD) is a type of anxiety disorder affecting 2-3 % of the population. The overwhelming thoughts and urges of OCD take up considerable time and energy and interfere with daily life and relationships. People with OCD typically experience a combination of obsessive thoughts, ideas, images or impulses that they can't control, along with the drive to do certain repetitive behaviors or actions in response to the dread or fear associated with the obsessions. Most students experience minor worry now and then, such as doubt as to whether or not a door was locked, having a superstitious thought (e.g. "Don't step on the cracks in the sidewalk") or needing to straighten things when anxious about an exam. These kinds of occasional thoughts are ordinary and common. However, for individuals struggling with OCD, such thoughts and urges are exaggerated and pressing. Obsessive thoughts are experienced as intense and consuming, and the urges to do behaviors that temporarily quiet the anxiety feel compelling and unavoidable. Life begins to center around the obsessions and compulsions of OCD. As a result, relationships with others, academic studies and other normal life activities are negatively affected by OCD.

Obsessions

The obsessive thoughts, ideas and images of OCD are typically distressing or disturbing, and feel out of the person's control. The individual usually can recognize that their obsessive thinking is unrealistic, but feels unable to stop the thoughts.

- Common types of obsessions include:
- Contamination Fears – e.g. fear of picking up germs from touching someone/something
- Doubts: e.g. Did I turn off the stove? Did I lock the door?
- Imagining causing harm to someone or to oneself: e.g. fears of having run someone over, fears that one could jump off of a high place
- Imagining behaving in socially inappropriate ways: e.g. impulse to shout out in church, images of sexual behavior with another person
- Need for order or symmetry: e.g. preoccupation with things being organized in a particular way

Compulsions

In an effort to get relief from the negative feelings associated with obsessive thoughts or images, people with OCD feel driven to repeat particular behaviors or actions. Common examples of compulsive behaviors include washing (e.g. washing hands repeatedly), cleaning, counting or repeating (e.g. saying a word a certain number of times), and ritualistic checking (e.g. to see if an appliance is turned off). Another common compulsive behavior is the need to do things "perfectly." For the person with OCD, this might mean making things symmetrical, doing things very slowly, or having to do things in a particular order. People with OCD may also "hoard" belongings of little or no worth, such as old newspapers or mail or other objects and feel anxious at the thought of losing or

discarding them.

Causes and Treatment of OCD

Research suggests that the causes of OCD may be largely genetic, but that stressful life circumstances can trigger the onset or recurrence of OCD. For about half to one third of OCD sufferers, the disorder starts in childhood. There is evidence to suggest that difficulties with information processing in the brain of the person with OCD leads to “getting stuck” on specific worried thoughts. Interestingly, individuals with OCD are also frequently diagnosed with depression. High dosages of certain anti-depressant medications (e.g. Luvox, Anafranil, Paxil, Prozac, Zoloft) have proved very effective in treating OCD. The efficacy of specific anti-depressants suggests that imbalances in the brain neurotransmitter serotonin may be common to both depression and OCD.

In addition to medication, cognitive behavior therapy is a helpful treatment for OCD. This type of therapy helps the client challenge their assumptions that something bad will happen if they don't perform the compulsive behavior of OCD. The client is asked to imagine or directly face the feared situation or idea (e.g. touching an object believed to be “contaminated”) and then encouraged not to engage in the compulsive behavior associated with the anxiety that arises (e.g. prevented from washing his or hands). OCD ranges in degree of severity, and sometimes referral to a specialist who can provide treatment directly in the feared or problematic situation is recommended.

For More Information

Experienced psychologists are available at the Union College Counseling Center for confidential help for Obsessive Compulsive Disorder. To make an appointment, stop by the front desk at the Wicker Wellness Center or call (518) 388-6161.