



NATIONAL INSTITUTE OF MENTAL HEALTH & NEURO SCIENCES

Institute of National Importance
Bengaluru

Department of Mental Health Education
in collaboration with **Community Psychiatry Unit,**
Department of Psychiatry



**OBSESSIVE
COMPULSIVE
DISORDER (OCD)**

OBSESSIVE COMPULSIVE DISORDER

What is Obsessive- Compulsive Disorder or OCD?

The main two features of OCD are Obsessions and Compulsions.

Obsessions are certain thoughts, doubts, images or urges that occur in one's mind. These are unwanted, repetitive by nature. Most people with OCD realize that obsessions are senseless, irrational, or excessive, but they are unable to ignore or suppress them. Obsessions cause significant distress and anxiety to the sufferers and as a result cause interference in their day to day functioning.

Compulsions are repetitive acts that the person is driven to carry out in spite of knowing that they are meaningless, unnecessary or excessive. Compulsions are usually in response to obsessions.

Example: A person with an obsessive fear of contamination washes hands repeatedly in order to ensure that his or her hands are clean. The person attempts to resist repeated hand-



washing, but gives in to the urge so as to relieve himself or herself of the anxiety or discomfort.

What are some common obsessions and compulsions?

Some common obsessions:

- Fear of getting dirty, contaminated or infected by persons or things in the environment.
- Immoral thoughts.
- Thoughts of harming or killing others or oneself.
- Recurring thoughts or images of sexual nature.
- Fear of blurting out obscenities.
- Fear of developing a serious life-threatening illness.
- Preoccupation to have objects arranged in a certain order or position.

Some common compulsions:

- Repeated hand-washing, taking unusually long time to bathe, or cleaning items in the house.
- Ordering or rearranging things in a certain manner.
- Repeatedly putting clothes on, and then taking them off.
- Counting over and over to a certain number.
- Touching certain objects in a specific way.

- Checking locks, electrical outlets, gas knobs, light switches etc. repeatedly.
- Repeating certain actions, such as going through a doorway.
- Constantly seeking approval (especially children)



Can other disorders show features of OCD?

Yes, these disorders that may show similar features to OCD are called Obsessive-Compulsive Spectrum Disorders (OCS). They may appear either with or without OCD.

Obsessive- Compulsive Spectrum Disorders comprise of:

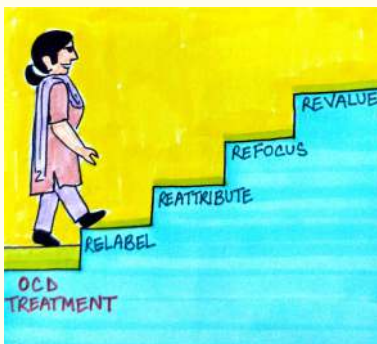
- Body Dysmorphic Disorder
- Trichotillomania (Plucking of hair)
- Tourette syndrome (sudden twitches, movements, or sounds that people do repeatedly.)
- Eating Disorders
- Pathological Gambling
- Compulsive buying among other disorders

What are the treatment options for my condition?

- Visit the nearest mental health professional for help.

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- Medical treatment includes using Selective Serotonin Reuptake Inhibitors (SSRIs) like Escitalopram, Fluoxetine, Sertraline, etc. which are also called anti-depressants. Treatment usually lasts for 1-2 years after which your treating psychiatrist will try and gradually stop your medicines, and see if symptoms reappear. If you remain symptom free, then you do not need to take drugs. Otherwise the drugs will have to be taken again.
 - In treating OCD, several Cognitive Behavioural Therapy techniques are used. Of them, “Exposure and Response Prevention”, is the most effective and widely used technique. It is effective in 60-70% of patients suffering from OCD. It includes
 - Sometimes, single drug therapy may not be enough for a response and is combined either with behaviour therapy or augmenting agents like Aripiprazole, Mementine, N-Acetyl Cysteine, Ondansetron.
 - Psychosurgery has been advocated as the last treatment of choice in OCD that does not respond to the above treatment. It has potentially serious side-effects, and can be tried only as a “last resort” when both medicines and behaviour therapy have failed. Deep brain stimulation (DBS) is another very recently emerging surgical option for the treatment of OCD unresponsive to other treatment methods.

How is “Exposure and Response Prevention” (ERP) used as a CBT technique for treating OCD?



It includes 4 steps

Step 1: Relabel

Recognize the intrusive thoughts and urges as due to a medical illness called OCD.

Step 2: Reattribute

Realize that the intrusive thoughts or urges are caused by certain biochemical imbalances (reduced level of serotonin) and malfunctioning circuits in the brain. They are “false brain messages”. Remember, “It's not me, it's the OCD.”

Step 3: Refocus

Work around the OCD thoughts by not giving in to a compulsion. Practice ERP daily; Do not avoid doing things and other activities; Do not substitute compulsions; Avoid using any anxiety reducing techniques; Keep realistic expectations.

Step 4: Revalue

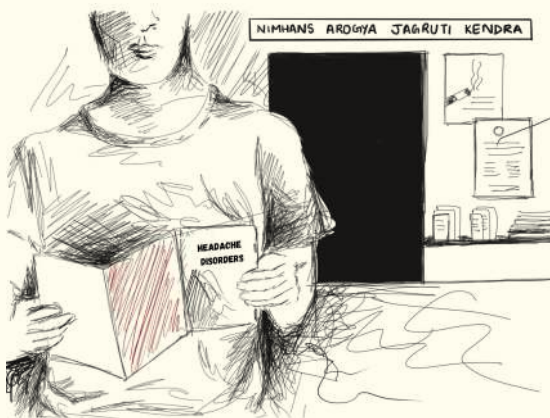
Successful practice of these steps results in revaluing obsessive-compulsive behaviors as worthless distractions to be ignored.

How is CBT done at NIMHANS?

You may be advised to undergo CBT on your consultation with the doctor at the OCD clinic. Therapy may be initiated at any given time in the treatment of OCD, and this is done based on your preparedness and motivation, and the feasibility (ability to attend sessions at least once weekly). If it is feasible for you to attend therapy on an outpatient basis at NIMHANS, you will be assigned a therapist, who would usually be a qualified or trainee psychiatrist, clinical psychologist or psychiatric social worker, all of whom are trained and supervised by the OCD Clinic Team at NIMHANS. The average number of sessions for a course of CBT for OCD is around 15 to 20, and can be taken at 1 or 2 sessions per week.

In case it is not feasible for you to come for sessions on a regular basis as an outpatient you may either be referred to a therapist close to your residence. In case there is no suitable therapist available near you, your OCD is severe and you wish to undergo therapy at NIMHANS, you may be advised admission to undergo CBT as an inpatient.

Where to find this brochure?



NIMHANS Arogya Jagruti Kendra,
G-5 ground floor, OPD block,
NIMHANS.

Contact us at:
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Mentalhealtheeducationnimhans.org

Mind space initiative:
<https://nimhans.ac.in/mind-space/>

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