

OBSESSIVE-COMPULSIVE DISORDER (OCD)



holding your hand through health

Do you or a loved one suffer from repetitive, unwanted and disturbing thoughts or urges?^{1,7} Do you spend hours on end checking, adjusting and rechecking things to the point where this interferes with your daily life?² Do you perform these physical acts or mental rituals in an attempt to get rid of these thoughts and urges?²



Although it is normal to doubt whether the stove was switched off, continuous checking to the extent that it interferes with a normal daily routine may be an indication that you suffer from obsessive-compulsive disorder (OCD).²

What is OCD?

People with OCD have persistent, senseless, unwanted urges or disturbing thoughts called obsessions, which compel them to perform some physical or mental acts called compulsions, in an attempt to get rid of the obsessions.^{2,3} Although the actions may provide temporary relief from anxiety, the obsession returns and results in a vicious cycle of obsession and compulsion.^{2,3} Symptoms of OCD may come and go, ease over time or get worse.⁴

The following table provides some examples of obsessions and the actions people with OCD may take to get rid of these urges. People with OCD often experience symptoms from more than one of the groups listed.^{1,2,4,5}

Obsessions

Fear of contamination or germs

Fear of losing or not having things they might need

Intrusive sexually explicit or violent thoughts, fear of harming others or themselves

Symmetry and order

Excessive focus on religion (blasphemous images) or moral ideas

People with OCD often realise that these obsessions and compulsions are not normal, but cannot control them and spend at least an hour or more on them every day.^{2,4} These unpleasant thoughts and actions lead to feelings of shame, disgust, guilt, distress, anxiety and result in unsuccessful completion of tasks.^{1,4,5}



Compulsions

Excessive cleaning and/or hand washing until they are raw and bleeding. Brushing each tooth in a particular order, washing every body part a specific number of times or having and adhering to certain rules (excessive by usual standards) on how to clean or wash dishes.

Accumulating useless items such as newspapers or empty food containers.

Checking repeatedly on loved ones to see that they are safe. Checking that doors are locked and appliances are switched off to avoid intrusion or accidents that can result in harm.

Arranging and ordering items (by colour or size) to be exact or symmetrical, counting, arranging in pairs, touching or tapping objects. Certain numbers may be considered "unlucky".

Excessive praying or engaging in rituals triggered by religious fear.

What causes OCD?



The exact cause of OCD is uncertain, but it seems as though there may be some physical changes in certain parts of the brain of patients with OCD that can cause a problem with the sending of messages between two parts of the brain.^{4,5}

OCD also seems to run in families and you have a greater risk of developing OCD if a close relative (parent or sibling) has OCD, especially if your relative developed OCD as a child or teen.⁴

People who have experienced abuse (physical or sexual) in childhood or other trauma are at an increased risk of developing OCD.⁴ Sometimes symptoms of OCD can also develop in children following a streptococcal infection or start or increase with hormonal imbalances such as before or during menstruation, at the onset or shortly after pregnancy or with menopause.^{4,5}

When to seek help



It is normal, on occasion, to go back and check that your baby or loved ones are safe or the door is locked. However, when these actions take up a considerable amount of time (more than an hour a day) and become so excessive that it interferes with other aspects of life, such as work, school and personal relationships, you may have OCD and need to seek help.^{2,4}

It is important to find a doctor you can talk to. A good, trusting and honest relationship with your doctor and therapist is essential in treating the symptoms of OCD.⁵



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Treatment✓

Your doctor will discuss your symptoms and medical history with you in order to choose the treatment option that will suit you best. Sometimes, in children, during pregnancy or if your symptoms are only mild, the doctor may send you to a therapist who can teach you how to manage your OCD with cognitive-behavioural therapy (CBT).⁵ Therapy can be provided on an individual basis, as group sessions or as family sessions.⁶ Therapy may be effective on its own and sometimes it may not be necessary to take medication.⁵

People with more severe symptoms may need to start on medication first to control the symptoms.⁵ Some people may be treated best with a combination of one or more medications and/or CBT.⁵



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The medication can take a long time to work (up to 10 to 12 weeks).⁵

It is important to have patience and continue your treatment regularly, as prescribed. Discuss any side effects you may experience with your doctor or pharmacist and do not stop your medication before discussing it with your doctor.⁴ Although there is no cure for OCD, early detection and treatment can provide relief from the symptoms and enable most people to lead a normal life.^{6,7}

If you suffer severely from OCD and do not respond to medical and behavioural therapy, you may be referred for brain surgery.^{5,7} In rare cases, hospitalisation may be recommended for intensive cognitive-behavioural therapy.⁵

Self-help tips

By adhering to some of the following simple recommendations, people with OCD can change their lifestyle to relieve anxiety and help them function better.²

Exercise regularly and pay mindful attention to the movement process.²



Get enough sleep – too little sleep can aggravate anxiety and worsen symptoms of OCD.²

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- When you experience OCD thoughts, try to refocus your attention to something you enjoy (e.g. play music) for at least 15 minutes.²
- Write down your obsessive thoughts every time they occur to help you realise how repetitive they are.²
- Create an OCD worry period and try to reschedule your obsessions to this time slot. Choose a set time and place when you can focus on your obsessions that you wrote down. Try not to correct them and do not spend more than the allocated time on your obsessions.²
- Stay closely connected to family and friends who can support you.²



Supporting a loved one

As a friend or family member, it is important to support the person with OCD in a loving and calm way.⁵ Avoid personal criticism and making negative comments as this can worsen OCD.² Instead, praise any improvement and attempts to delay or resist OCD behaviour.⁵

Living with a person with OCD can be stressful and it is as important to take care of yourself.⁸ In this way, you will be in a better position to support the person with OCD.⁸ You may need to attend family sessions with your loved one or join a support group where you can also raise your concerns and share your feelings.⁸

In closing:

“***OCD is like an unwelcome guest with bad manners. It moves into a mind – and it doesn’t want to leave.***”⁸

OCD is a common, chronic and long-lasting disorder which may last a lifetime and can come and go many times during your lifetime.^{4,5} Although there is no cure for OCD, treatment with medication and psychotherapy can help most people with OCD take back control of their lives.^{6,7}

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YOU ARE NOT ALONE

It may feel as though you are alone with your condition. You are not alone. Speak to your Healthcare Professional if you are concerned that you may have obsessive-compulsive disorder.

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