

Obsessive-Compulsive Disorder: Information and Treatment Choices



Obsessive-compulsive disorder (OCD) is an anxiety condition that affects adults as well as children. Individuals with OCD suffer from obsessions and/or compulsions.

An *obsession* is a thought, idea or image that enters your mind and won't go away. It may make you feel very anxious. If you have OCD, you may worry that you will infect yourself or others, or forget something important like locking your door or turning off the stove.

A *compulsion* or ritual is any behavior that is repeated over and over in response to an obsession. For example, if you are worried about germs (the obsession), you may wash your hands repeatedly (the compulsion), even though your hands are clean. If you are worried about locking your door (the obsession), you may check the door repeatedly to make sure it is locked (the compulsion).

There are also mental compulsions, such as counting numbers in a certain way.

Individuals with OCD often avoid situations or events that may trigger obsessions or compulsions. Compulsions are hard to resist, yet they increase the feeling that there is something to worry about. OCD interferes with daily life, leading to anxiety and discomfort.

What causes OCD?

Research shows that OCD is caused and maintained by a combination of:

- biological factors
- life experiences, stresses, and traumas
- psychological factors such as beliefs or attitudes

OCD often begins during adolescence or early childhood. If not treated, OCD symptoms tend to continue and can get worse over time.

Treatment options

There are two types of effective treatments for OCD: a type of psychotherapy called cognitive-behavior therapy, and medications.

Cognitive-behavior therapy (CBT)

CBT is a highly effective treatment that can produce long-lasting bene-

fits, even after the sessions with your therapist have ended. CBT is recommended for everyone with OCD, regardless of the severity.

The goal of CBT is to change your beliefs and behavior. This is accomplished by gradually and deliberately facing the situations that you fear without repeating the compulsion. This form of CBT is called "exposure and response prevention." It requires your active involvement.

CBT for obsessive-compulsive disorder is usually offered in a group format. Here are some reasons for this:

- Groups help people not to feel alone in their struggles.
- Group members feel encouraged by one another.
- Groups focus on learning the skills needed to do the exposure and response prevention exercises effectively.

Medications

Although treating OCD with medications is effective, when the medicine is stopped, many people find that the disorder returns. If you are prescribed medications, you will meet with a psychiatrist to monitor your progress. Medications may produce some side effects that are unpleasant or uncomfortable, but these often decrease over time.



Summary of treatment recommendations

Mild to moderate obsessive-compulsive disorder

- CBT alone is recommended. There may be no advantage to combining it with medications.
- If you have a strong preference for medication, it can be combined with CBT or taken alone.
- Medication may be prescribed if you are unsuccessful with CBT.

Severe obsessive-compulsive disorder

Your medical professional may recommend that you receive both CBT and medication.

As you consider your choices for treatment, you may find that it's helpful to first think about the results that you hope to achieve. Therefore, a good place to start is to carefully consider your treatment goals.

Treatment goals

- Reduce symptoms of panic, feelings of anxiety, and agoraphobia.
- Increase feelings of self-control.
- Improve your ability to cope with situations and events that make you anxious.
- Improve your quality of life.

Other resources

- OC Foundation: (203) 315-2190, info@ocfoundation.org, www.ocfoundation.org
- Anxiety Disorders Association of America: (301) 231-9350; www.adaa.org
- National Institute of Mental Health: (800) (647-2642); (301) 443-4513; www.nimh.nih.gov
- Connect to our Web site at members.kp.org.
- Check your *Kaiser Permanente Healthwise Handbook*.
- Listen to the Kaiser Permanente Healthphone at 1-800-332-7563. For TTY, call 1-800-777-9059.
- Visit your facility's Health Education Department for books, videos, classes, and additional resources.

Other options

Some people feel that they need additional therapy to help with problems other than OCD. If this is the case, your medical professional may recommend that you attend another therapy group or pursue individual psychotherapy to address these other issues. CBT is the only type of therapy that has been proven to be effective for OCD. Other therapies and relaxation training have not been shown to be effective in the treatment of OCD.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other medical professional. If you have persistent health problems, or if you have further questions, please consult your doctor. If you are thinking seriously about suicide or hurting yourself, get help right away. Call your Kaiser Permanente health care professional or go to a Plan hospital. If you think you cannot safely go to a Plan hospital, call 9-1-1 or go to the nearest hospital emergency room.