

# Obsessive compulsive disorder

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**Checked version of the article can be found here ([https://www.wikilectures.eu/index.php?title=Obsessive\\_compulsive\\_disorder&oldid=376047](https://www.wikilectures.eu/index.php?title=Obsessive_compulsive_disorder&oldid=376047)).**

See also comparison of actual and checked version ([https://www.wikilectures.eu/index.php?title=Obsessive\\_compulsive\\_disorder&diff=-&oldid=376047](https://www.wikilectures.eu/index.php?title=Obsessive_compulsive_disorder&diff=-&oldid=376047)).

Obsessive-compulsive disorders (OCD) are very common anxiety disorders characterized by so-called intrusive thoughts (own, unwanted, repetitive thoughts, obsessions) and/or compulsive repetitive actions (compulsions)



*After leaving the apartment, the patient begins to wonder if he really locked, turned off, or turned off the gas stove. He feels tension, anxiety, worry - obsession that he has not locked and someone will rob him; that it didn't go out and the electricity ignites; that he did not turn off the gas stove and the gas explodes. He has to go back and check everything. After checking (performing a compulsion, a ritual), the anxiety disappears. The patient leaves the apartment again and everything repeats itself. For example, before he leaves for work, he has to go back 17 times to check the locked door.*

Performing a compulsion (ritual) removes the anxiety, but only temporarily. From a long-term perspective, it leads to the emergence of a "vicious circle" and the escalation of anxiety.

It is a serious illness, but most forms of OCD are treatable these days. Rarely, the disease cannot be managed with treatment, in these cases it can lead to disability.

## Epidemiology

OCD is the second most common psychiatric illness after depression. It affects 2-3% of the population (ie around 200,000 people in the Czech Republic). It usually manifests around the age of 20. Men and women are affected equally. Climate, race, or cultural mores probably play no role.

## Symptoms and Diagnosis

In order to diagnose a patient with OCD, it is necessary to:

that he has had OCD symptoms for at least 2 weeks

to perceive intrusive thoughts as repetitive, irrational and disturbing his mental well-being

to be unable to suppress intrusive thoughts and/or compulsive actions and to perceive giving in to them as unpleasant

to regard the intrusive thoughts as his own

(if he hears voices telling him that he has not locked the door and that someone may rob him, or if the patient states that these are foreign thoughts that are being put into his head, then one should consider schizophrenia as a differential diagnosis).

## Classification according to the International Classification of Diseases, 10th Revision

- division according to International Classification of Diseases-10:

	International Classification of Diseases-10
<b>F42</b>	<b>Obsessive-compulsive disorder</b>
F42.0	Predominantly intrusive thoughts or ruminations
F42.1	Predominantly compulsive acts (compulsive rituals)
F42.2	Mixed compulsive thoughts and actions
F42.8	Other obsessive-compulsive disorders
F42.9	Obsessive-compulsive disorder, NS

## Therapy

The treatment of first choice today is cognitive behavioral therapy. The patient is exposed to a situation that causes him to develop anxiety and is subsequently prevented from performing the ritual/compulsion. The therapy must be "tailored" for the patient, we always proceed from activities that are easier for the patient to more complex ones.

*Touching the toilet seat The patient has become convinced that all objects around him are covered with germs and fears that he will contract an infectious disease (= obsession). Therefore, as soon as he touches anything with his bare hand, he must go to the bathroom and wash his hands with antibacterial soap for 7.5 minutes, in precisely defined strokes (= ritual/compulsion). If he gets them wrong, he starts all over again. He washes his hands for an average of 5 hours a day. He was referred to a psychiatrist by a dermatologist, whom he visited for dermatitis of the washed areas.*

*An example of cognitive-behavioral therapy: We let the patient touch an "infectious object" (e.g. a toilet seat) and then we prevent him from washing his hands (by performing a compulsion/ritual). The anxiety that was caused by touching the toilet seat gradually subsides, helping the patient to realize that hand washing is not necessary to get rid of the anxiety.*

Other components of the treatment may be

- **Pharmacotherapy** (mainly antidepressants of the type SSRI; in some cases, SSRI preparations are combined with anxiolytics or neuroleptics).
- **Regime measures** (elimination of stress, relaxation, physical activity).
- **Neurosurgery** (cingulotomy; neurosurgical treatment is strictly indicated and used only in malignant forms of OCD)
- **Electroconvulsive therapy** (the effect is at least debatable).

## Links

### Related Articles

- Anxiety disorders
- Phobic anxiety states
- Mental Hygiene

### External Sources

- Obsessive compulsive disorder Wikipedia article ([https://en.wikipedia.org/wiki/Obsessive-compulsive\\_disorder](https://en.wikipedia.org/wiki/Obsessive-compulsive_disorder))

### References

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- PRAŠKO, Ján, et al. *Obsedantně-kompulzivní porucha a jak se jí bránit*. 1. edition. Praha : Portál, 2003. 115 pp. ISBN 80-7178-810-4.
- PRAŠKO, Ján – PRAŠKOVÁ, Hana. *Obsedantně-kompulzivní porucha a jak ji zvládat*. 1. edition. Praha : Galén, 2008. 69 pp. ISBN 978-80-7262-531-4.
- PIDRMAN, Vladimír. *Obsedantně kompulzivní porucha. Příručka pro lékaře*. 1. edition. Praha : Galén, 1999. 32 pp. ISBN 80-7262-041-X.

- NATIONAL INSTITUTE OF MENTAL HEALTH,. *Obsessive-Compulsive Disorder, OCD* [online]. [cit. 2010-03-12]. <<https://www.nimh.nih.gov/health/topics/obsessive-compulsive-disorder-ocd/index.shtml>>.