

"I can't stop myself"

The devastation of obsessive-compulsive disorder

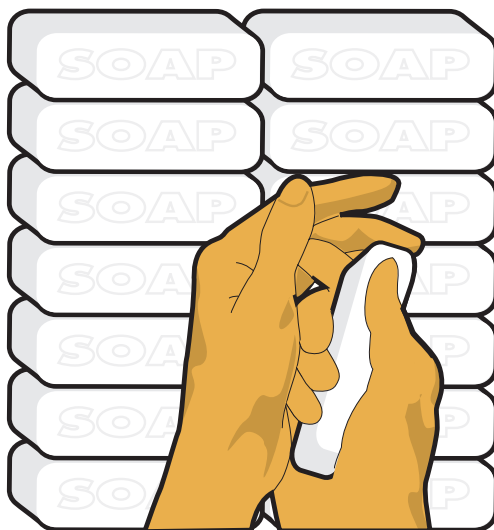
Mary is afraid that everything she touches is infested with germs, so she uses a glove to open all doors and compulsively washes her hands every few minutes to get rid of any germs. Bob is so overly concerned about orderliness that he spends hours arranging and rearranging the items on his desk. He cannot leave his house until he has everything perfectly in order.

These are just 2 examples of the effects of obsessive-compulsive disorder (OCD), an anxiety disorder that makes many people unable to function fully in daily life. OCD often begins in adolescence or young adulthood and affects about 2% of the U.S. population, including as many as 1 in every 200 children and adolescents.

A person with OCD usually suffers from irrational fears or obsessive thoughts. They often compulsively perform a repeated behavior in order to try to relieve the anxiety caused by their obsessive thoughts. They believe that something bad will happen if they don't perform this behavior. People with OCD live a life of great anxiety and shame and are often tormented for years by the disorder before they are diagnosed and receive treatment. Once diagnosed, a person with OCD can be effectively treated with medication and psychotherapy, separately or in combination.

Several medications have been shown to be effective in controlling OCD symptoms in adults. A study in the November 25, 1998, issue of *JAMA* shows that sertraline hydrochloride is a safe and effective short-term treatment for children and adolescents with OCD.

Additional Sources: National Mental Health Association, American Psychiatric Association, American Academy of Child & Adolescent Psychiatry, Obsessive-Compulsive Foundation, The American Medical Association Encyclopedia of Medicine



WHAT IS OCD?

OCD is a type of anxiety disorder. People with OCD are plagued by intrusive, unwanted thoughts (**obsessions**) that are often very unpleasant. The obsessions may include worrying about being contaminated with germs, unreasonable fears of being harmed or harming others, fear of losing control and acting on aggressive urges, or excessive religious or moral doubt. Most people with OCD realize that the obsessions do not make sense but they are unable to stop thinking them, which causes a great deal of distress. In response to their obsessions, people with OCD may develop ritualistic behaviors (**compulsions**), which are repeated excessively to help relieve the anxiety caused by their obsessions. Compulsions can include excessive hand-washing, counting, repeating phrases or behaviors, performing a complicated series of tasks in very precise order, or checking things over and over again to make sure they are a certain way.

CAUSES:

The exact cause of OCD is still under investigation. Some believe it may be caused by an imbalance of serotonin, a chemical messenger in the body that in the brain is believed to be involved with controlling mood states and consciousness.

SYMPTOMS:

OCD symptoms can range from mild to severe. Some may only experience obsessions. People may be able to control their obsessions and compulsions for short periods of time, thereby hiding the problem while they're at work or school. But as the condition becomes more severe, OCD can consume people's lives to the point that they are no longer able to function in their daily activities because so much time is spent performing their rituals. OCD is sometimes accompanied by depression, eating disorders, substance abuse disorder, a personality disorder, attention deficit disorder, or another anxiety disorder. These co-existing disorders, coupled with a tendency to hide the problem, make it very difficult to diagnose and treat the disorder. People with OCD often don't receive treatment until years after the onset of symptoms.

TREATMENT:

If diagnosed early, this condition can be effectively treated with a combination of psychotherapy (especially behavior therapy) and drug therapy. A specific behavior therapy approach called "exposure and response prevention" has been shown to be effective in treating people with OCD. This approach involves having the patient deliberately confront the feared object or idea, either directly or through imagination. Recent studies have shown that drugs that affect the neurotransmitter serotonin can significantly decrease the symptoms of OCD. Five drugs known as serotonin reuptake inhibitors (SRIs) or selective serotonin reuptake inhibitors (SSRIs), *clomipramine*, *fluoxetine*, *fluvoxamine*, *paroxetine*, and *sertraline*, have been approved for the treatment of OCD.

FOR MORE INFORMATION:

- National Institute of Mental Health
888/8-ANXIETY (888/826-9438) or
www.nimh.nih.gov/anxiety
- American Psychiatric Association
Let's Talk: *Facts About Obsessive Compulsive Disorder* (Dept. J98) 1400 K Street, N.W.
Washington, DC 20005 or www.psych.org

INFORM YOURSELF:

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OBSESSIVE-COMPULSIVE DISORDER

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Mi Young Hwang, Writer

Richard M. Glass, MD, Editor

Jeff Molter, Director of Science News

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