

# **Obsessive and compulsive disorder (OCD)**

# History

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- 14<sup>th</sup> & 15<sup>th</sup> century thought people were possessed by the devil and treated by exorcism
- 17<sup>th</sup> century thought people were cleansing their guilt
- 18<sup>th</sup> century finally considered medical issue
- 20<sup>th</sup> century began treating with behavioral techniques

# WHAT IS OCD?

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- It is an anxiety disorder.
- The person has recurring thoughts or images(obsessions) and/or repetitive, ritualistic-type behaviors that the individual is unable to keep from doing(compulsions).
- The person may try to suppress these thoughts or behaviors but is unable to do so.
- The individual knows that the thoughts or behaviors are irrational but feels powerless to stop.

# DEFINITIONS

## **Obsessions:**

Obsessions are recurrent and persistent thoughts, impulses, or images that cause distressing emotions such as anxiety or disgust.

These intrusive thoughts cannot be settled by logic or reasoning.

Typical obsessions include excessive concerns about contamination or harm, the need for symmetry or exactness, or forbidden sexual or religious thoughts.

# COMPULSIONS

Compulsions are repetitive behaviors or mental acts that a person feels driven to perform in response to an obsession. The behaviors are aimed at preventing or reducing distress or a feared situation.

Although the compulsion may bring some relief to the worry, the obsession returns and the cycle repeats over and over.

Some of the common compulsions include cleaning, repeating, checking, ordering and arranging , Mental compulsions e.t.c

# DEFINITION OF OCD

Obsessive-Compulsive Disorder (OCD) is a common, chronic and long-lasting disorder in which a person has uncontrollable, reoccurring thoughts (obsessions) and behaviors (compulsions) that he or she feels the urge to repeat over and over.

An obsession is defined as an idea, impulse, or image which intrude into the conscious aware repeatedly.

# CAUSES OF THE DISORDER

## **Biological Factors:**

- People with a first degree relative (parent or sibling) with OCD have a 5 times greater risk of having the illness.
- identical twins have more chances of developing OCD as compared to dizygotic twins.

## **Psychoanalytical Theory:**


According to the Freud's psychoanalytical theory OCD arises when unacceptable wishes and impulses from the id are only partially repressed. They cause anxiety. Ego defence mechanisms are used to reduce the anxiety. These defence mechanisms are used unconsciously in the form of acts, such as hand washing. These acts are thought to be symbolically undo the unacceptable id impulses.



## **Behavior Theory:**

This theory explains Obsessions as a conditioned stimulus to anxiety. Compulsions have been described as learned behavior that decreases the anxiety associated with the Obsessions.

This decrease in anxiety positively reinforces the compulsive acts and they become stable learned behavior.



## **Neuroanatomical Factors:**

- there is evidence of abnormal brain structure and activity in patients with OCD.
- these abnormalities are found in the pathway linking the lobes (responsible for judgement) with the basal ganglia (which are part of the system frontal for planning behaviour)
- Serotonin deficiency – OCD sufferers have too little serotonin for their nerve cells to communicate effectively