OCD patients are driven by fear and anxiety
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“Although the world is full of suffering, it is also full of overcoming it.” This quotation by Helen Keller is one that appears in the OCD Workbook by Bruce M. Hyman, PhD and Cherry Pendrick, RN that is used by patients who seek treatment for their Obsessive Compulsive Disorder (OCD).

People with OCD do suffer from feelings of torment, fear and dread. Their involuntary, unwanted thoughts (obsessions) tell them they must do the repetitive behaviors or rituals (compulsions) to prevent terrible consequences to themselves or others.

Family members may suffer as well. They may not know how to help or they may get caught up in “helping” their relatives by checking or going along with compulsions. They may feel frustrated if they believe their relatives can control these symptoms at will.

The sufferer of this anxiety disorder may not seek treatment for various reasons. He may believe, “that’s just the way I am,” or he may feel ashamed to talk to his physician or another health professional. He may not know there are specific therapies and medications to alleviate the symptoms.

By contrast, people with Obsessive Compulsive Personality Disorder (OCPD) would be less likely to want help or relief. They have a preoccupation with details, rules, orderliness, perfectionism and control. They are very reliable and organized. They may, however, experience problems when flexibility or compromise would be more effective.

There are a variety of manifestations of OCD, but the commonality is the fear, dread and anxiety that are felt if the compulsion is not performed. The compulsions take excessive time, an hour or more per day, and they provide only temporary relief from the anxiety, thus the need to repeat. They get in the way of daily life such as going to work, socializing and completing school work. The person knows the thoughts are irrational, but he is no less able to resist them.

Recognizable behaviors include:
- Hand washing
- Checking locks and appliances
- Checking that you did not run over someone
- Repeating body movements (tapping, touching)
- Putting things in order until it “feels right”
- Constantly asking for reassurance
- Collecting and hoarding (a specialized form of OCD)
- Obsessional slowness

Mental compulsions that are often hidden include:
- Mental review of events to prevent harm to self or others
- Repeating prayers or religious phrases to prevent harm or terrible consequences
- Counting while performing a task to end in a “good” number

The obsessive thoughts often include an imperative such as “I must” do this behavior or something terrible will happen to me or to my family and it would be my fault. Examples include:
- Fear of contamination
- Preoccupation with symmetry
- Excessive fear of having blasphemous thoughts (known as Scrupulosity)
- Unwanted urges to do something violent or immoral
- Purely obsessional thoughts leading to avoidance

Treatment can include a combination of therapy and medication (usually one affecting serotonin levels). The therapy recommended by the OC Foundation is a form of Cognitive Behavioral Therapy (CBT) called Exposure-Response Prevention (ERP). Persons with OCD learn how to label their OCD thoughts and learn to retrain their brains to reduce symptoms. The workbook mentioned at the beginning of this article is designed to be a self-guided treatment, but support and coaching from a therapist may help you stay on track with your goals.

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