

Can OCD be treated ?

Obsessive–Compulsive Disorder (OCD) can be a chronic, but equally a very treatable medical condition.

The treatment found to be the most effective in treating OCD is **Cognitive Behavioural Therapy (CBT)**. In many cases, CBT alone is highly effective in treating OCD, but for some people a combination of CBT and medication is also effective.

CBT is a form of talking therapy which focuses on the problems a person has in the here and now and helps them explore and understand alternative ways of thinking (the cognitive approach) and to challenge their beliefs through behavioural exercises.

If medication is introduced into the treatment plan, this usually takes the form of antidepressants, SSRIs (selective serotonin reuptake inhibitors), which act in the serotonin system. These are usually tried first (before non-selective SRIs). Medication may reduce the anxiety enough for a person to start, and eventually succeed in therapy, although medication is not recommended as a sole treatment method. The SSRIs usually recommended for the treatment of OCD in the UK are:

- Citalopram (Cipramil)
- Escitalopram (Cipralext)
- Fluoxetine (Prozac)
- Fluvoxamine (Luvox and Faverin)
- Paroxetine (Paxil and Seroxat)
- Sertraline (Lustral and Zoloft)

The non-selective SRI most commonly used for treating OCD - after trying an SSRI - is Clomipramine (Anafranil).

Women that are pregnant or breastfeeding should consult our leaflet 'perinatal and postnatal OCD' for further information on medication treatment.

Before any kind of treatment for OCD can commence you should always consult your GP.

In general, doctors, nurses and other healthcare professionals in the NHS, are expected to follow the National Institute for Health and Clinical Excellence (NICE) guidelines for the identification, treatment and management of OCD.

When you first see a healthcare professional about your symptoms, it is very important that you are honest and open about your thoughts and behaviours, no matter how embarrassing they may seem. Almost certainly, they have heard it all before – and by being honest, you will help them to identify the most suitable treatment for you.

Remember: whether you are seeking professional help or going down the self-help route, the more you know about OCD, the better equipped you and your family will be to deal with it.

About OCD-UK

OCD-UK is unique in being the only OCD charity in the UK that is completely service-user led, run by people with OCD, for people with OCD.

The charity's objective is to make a positive and meaningful difference in the everyday lives of people affected by OCD, by providing accessible and effective support services, and by campaigning for improved access and quality of treatment and care for people with OCD.

One of the ways we help people with OCD is by facilitating a safe environment for them to communicate with each other and to provide mutual understanding and support. Below is a list of the core aspects of OCD-UK's work.

- Offering direct individual OCD support
- Hosting OCD events around the whole of the UK
- Facilitating support groups and social events
- Providing one-on-one advocacy support
- Lobbying the NHS for improved access to treatment
- Supporting research into the cause and prevention of OCD
- Producing and distributing specialist OCD information literature
- Increasing awareness around the impact of the illness
- Hosting OCD training workshops for health professionals

Ways to help OCD-UK

Sometimes, people like to give something back to OCD-UK, especially if they have received help or support from the charity, or if they have a family member or friend suffering with OCD. There are lots of ways you can support the work of OCD-UK.

- Become a member (from £2 a month)
- Make a one-off or regular donation
- Participate in a fund-raising event
- Use the shopping links to Amazon on the OCD-UK website

More detailed information about OCD and relevant treatments is freely available on the OCD-UK website. Alternatively you can purchase an OCD information booklet, available upon request, priced at just £2.50.

OCD-UK

PO Box 8955, Nottingham NG10 9AU

Email: support@ocduk.org

Telephone: 0845 120 3778

Registered Charity Number: 1103210

You won't need to be reminded of how important it is that OCD-UK goes from strength-to-strength. However, it's a fact of life that funding is the key to OCD-UK's ability to further the aims of the charity.

WE RELY ENTIRELY ON PUBLIC SUPPORT



OCD-UK

Registered Charity Number: 1103210

Obsessive–Compulsive Disorder

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- What causes OCD
- What the family can do to help
- Treatments for OCD
- About OCD-UK



www.ocduk.org



OCD-UK is the leading national charity, independently working with and for children and adults affected by **Obsessive-Compulsive Disorder (OCD)**

What is OCD?

Obsessive–Compulsive Disorder (OCD) is a serious anxiety related condition. Sufferers frequently experience intrusive and unwelcome obsessional thoughts, often followed by repetitive compulsions.

The illness affects as many as 12 in every 1000 people, from young children to adults. Based on current estimates for the UK population there are potentially around 741,504 people living with OCD at any one time.

In actual fact, OCD can be so debilitating that the World Health Organisation, (WHO), has ranked the illness amongst the top ten most disabling illnesses of any kind, in terms of loss of earnings and reduced quality of life.

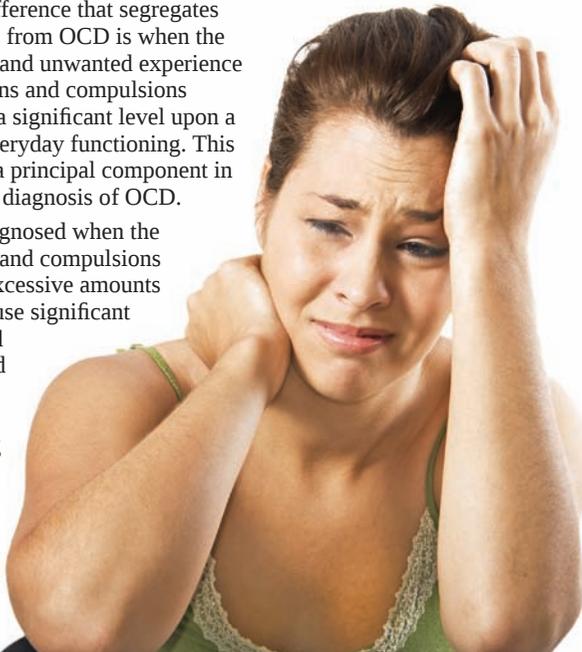
OCD presents itself in many guises, and certainly goes far beyond the common perception of excessive hand washing or checking light switches. It has traditionally been considered that there are four main categories of OCD. Although there are numerous forms of the illness within each category, typically a person's OCD will fall into one of the following four main areas:

- Checking
- Contamination / Mental Contamination
- Hoarding
- Ruminations / Intrusive Thoughts

To some degree, OCD-type behaviours and symptoms are probably experienced, at one time or another, by most people, where they have succumbed to the seemingly nonsensical need to perform an odd and often unrelated behaviour pattern.

The key difference that segregates little quirks from OCD is when the distressing and unwanted experience of obsessions and compulsions impacts to a significant level upon a person's everyday functioning. This represents a principal component in the clinical diagnosis of OCD.

OCD is diagnosed when the obsessions and compulsions consume excessive amounts of time, cause significant distress and anguish and interfere with daily functioning at home, school or work.



Obsessions and Compulsions

In general, OCD sufferers experience obsessions, which take the form of persistent and uncontrollable thoughts, images, impulses, worries, fears or doubts. They are intrusive, unwanted, and disturbing and are incredibly difficult to ignore.

Compulsions are repetitive physical behaviours and actions, or mental thought rituals, that are performed over and over again, in an attempt to relieve the anxiety caused by the obsessional thoughts.

But unfortunately, any relief that the compulsive behaviours provide is only temporary and short lived, and often reinforces the original obsession, creating a gradual worsening cycle of OCD.

Typical OCD Obsessions and Compulsions

- Excessive washing of one's hands or body (thought of being contaminated)
- Excessive cleaning of clothes and around the house, kitchen, bathroom etc (thought that germs or perceived contamination from body fluids or dangers from outside, such as dog mess or used condoms)
- Checking that items are arranged 'just right' and constantly adjusting inconsequential items like pens on a table until they are aligned to feel 'just right' (thought that something bad may happen to a loved one if not aligned correctly).
- Mental rituals or thought patterns such as saying a particular phrase, or counting to a certain number to 'neutralise' an obsessional thought (thoughts that something bad may happen to a loved one).
- Avoiding particular places or people to avoid an intrusive thought (about harming someone, or contamination fears).
- Repeatedly opening and sealing letters or greeting cards one has just written (fear of having written something offensive by mistake within the letter/card)
- Constant checking of lights, handles, taps, locks to prevent perceived danger from flooding, break-in, gas leak or fire.
- Saying out loud or quietly specific words in response to other words (to prevent disaster happening)
- Avoidance of kitchen knives and other such instruments (thought of inadvertently harming someone with a knife).

What Causes OCD?

In spite of a range of theories and considerable research, scientists so far have not been able to identify a definitive cause for a person developing OCD. Neurobiological, genetic, behavioural, cognitive, and environmental factors have all been suggested as possible factors. All of the theories offer compelling and highly informative insights. There is even the possibility that a combination of these theories may eventually be identified as the actual cause of OCD.

Whilst the cause is currently still being debated, sometimes vigorously by the scientists, what is not in contention is the fact that Obsessive-Compulsive Disorder can be a chronic, but equally, a very treatable medical condition.

What can the family do to help?

OCD can be a terrifying illness that affects the whole family. It can be frustrating, exhausting and scary for everyone, family, friends and carers (FFC), be they parents, siblings, spouses or children.

Many family members of a person with OCD are often unaware of how best to help their loved one. The illness can be very confusing for all involved and can put a strain on family relationships. However, the most important thing to remember is that OCD is a very treatable medical condition and you play a vital role in the effectiveness of that treatment.

As a family member you can have an important role in giving practical and emotional support to someone with OCD. If you care for someone with OCD, finding out about the condition, and understanding what your loved one is going through, is perhaps the most important thing that you can do. The more you learn about OCD, the better equipped you will be to deal with its many faces and the problems that it will cause your loved one and the rest of your family.

As a general rule you should never collude with the OCD demands, this is called 'reassurance', which allows the person with OCD to avoid the feared situation and offers them the reassurance, which in the short term lowers their anxiety, but in the long term reinforces the fear. But you know your relative; you will know when to push them hard, and when to give them an emotional arm around the shoulder and a hug for support, emotional reassurance that they are not alone is sometimes the best reassurance of all.

It is also important to remember that OCD is nobody's fault, not yours, or that of your loved ones. What is important is that you agree to work together as a team, to face and tackle the OCD.