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# Obsessive-Compulsive Disorder: Symptoms and Treatment

## *Guide for Adult Patients and Loved Ones*

Obsessive-compulsive disorder, commonly abbreviated as OCD, is an anxiety-related mental health disorder characterized by unwanted, intrusive thoughts and repetitive, ritual-like behaviors. These intrusive thoughts and repetitive behaviors are called “obsessions” and “compulsions”, respectively, which is how the disorder gets its name.

Most people experience distressing thoughts and feelings of anxiety from time to time. However, individuals who have OCD tend to feel anxious much more frequently and for reasons that seem unnecessary or excessive to others. Obsessive thoughts and compulsive behaviors can occupy several hours of a person’s day, and they may significantly interfere with normal functioning.

OCD is slightly less common than some other mental health disorders, occurring in about 1 in 100 adults. Of these individuals, 50% experience severe impairment. OCD typically develops between the ages of 8 and 12 or during late adolescence/early adulthood, but some people may not be diagnosed until later adulthood. Women are around 2–3 times more likely than men to be diagnosed with the disorder.

### **Symptoms**

As mentioned above, obsessive-compulsive disorder is characterized by intrusive thoughts called obsessions and ritualized behaviors called compulsions. A person’s obsessions create feelings of anxiety or discomfort, and their compulsions serve to temporarily alleviate these negative feelings.

The exact obsessions and compulsions experienced vary from person to person. However, they often fall into one or more general categories.

### ▶ Common Obsessions

- Fear of germs, dirt, illness, bodily fluids, pollutants, or other sources of perceived contamination
- Excessive concern with items being arranged in a specific way, such as symmetrically or at right angles
- Excessive concern with actions being performed in a certain way or in a certain order
- Fear of being responsible for something terrible happening, especially due to personal negligence
- Fear of making mistakes
- Fear of not having a certain item when it is needed or of losing or forgetting important information
- Fear of acting on violent impulses to harm oneself or others
- Fear of acting on sexual impulses or engaging in inappropriate sexual behavior
- Fear of offending God or excessive concern with morality
- Excessive concern over one's sexual orientation or gender identity

### ▶ Common Compulsions

- Excessive cleaning, bathing, handwashing, or grooming
- Excessive arrangement and ordering of items in a very precise way
- "Checking" behaviors, such as checking that no one was harmed, that nothing terrible happened, or that a mistake was not made
- Mentally reviewing past events or behaviors to make sure they were done correctly or that no one was harmed
- Repeating routine activities and bodily movements for no apparent reason, or habitually performing certain actions multiple times in a row
- Counting and re-counting objects or actions
- Avoiding situations that might trigger obsessive thoughts

As you can see, many obsessions and compulsions revolve around fears and anxieties that may be reasonable in moderation. However, a person with OCD becomes excessively preoccupied with these fears, to the extent that they interfere with work, school, relationships, socializing, interests and hobbies, etc.

## **Treatments**

Obsessive-compulsive disorder can be challenging to live with, but it is treatable, and many people who are diagnosed with OCD go on to live full, normal lives. They just need some help managing their disorder.

## ► Therapy and Skills Training

Professional therapy and counseling are important components of treatment for OCD. Treatments like individual therapy, group therapy, and skills training can help individuals learn how to manage symptoms of OCD.

Some common therapeutic practices include:

- Teaching you about OCD and what it means.
- Talking about and helping you understand the obsessive thoughts that cause your anxiety. When talking about these thoughts, the therapist may be able to change them and help you think differently.
- Encouraging you to challenge your obsessive thoughts in order to feel less controlled by them.
- Slowly exposing you to your fears and to the objects or situations that make you feel anxious, and teaching you how to avoid engaging in compulsive behaviors. This is a practice known as Exposure and Response Prevention (ERP).
- Guiding you through relaxation, meditation, and deep breathing techniques, and teaching you how to perform these techniques on your own.
- Looking at your hobbies and interests and working on ways for you to participate in them while enjoying yourself.

## ► Medication

Psychiatric medications may be used in combination with therapy to help you manage your OCD symptoms.

Specific types of antidepressants called serotonin reuptake inhibitors (SRIs) and selective serotonin reuptake inhibitors (SSRIs) are commonly used to treat OCD. They are generally effective and have few side effects, although they do not provide immediate relief. Antipsychotic medications have also been shown to help some people who do not experience a reduction of symptoms with antidepressants.

People who benefit from medication typically see a 40–60% reduction in their OCD symptoms. However, it may be necessary to try several different medications or a combination of medications to find a prescription that works for you. In any case, you should speak with your clinician or psychiatrist about the potential benefits and possible negative side effects before starting any medication regimen.

## ► Brain Stimulation Therapies

Individuals who do not experience relief from OCD symptoms after trying therapy and medication may be eligible to receive a form of brain stimulation therapy.

These therapies use electric currents to generate magnetic fields within the brain, which in turn regulate brain activity and reduce symptoms of OCD. The most commonly used brain

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stimulation therapies are deep brain stimulation (DBS) and transcranial magnetic stimulation (TMS).

Brain stimulation therapies are safe and often effective for individuals with treatment-resistant OCD, though they can carry side effects. Be sure to discuss the benefits and risks of brain stimulation therapy with your clinician before beginning any treatment.

## **Supporting a Loved One with OCD**

If you know someone who has OCD or whom you suspect may have OCD, then you might be looking for ways to help and support them. Family members, friends, and other supporters can be great sources of strength for individuals living with obsessive-compulsive disorder.

The following section includes tips that can be helpful for supporting someone with OCD. Keep in mind they might not all be right for you and your loved one, but it could be useful to give them a try.

### **Educate yourself**

Stay informed about what OCD is, what it looks like, and how it can affect your loved one. Encourage them to become educated about OCD if they have not done so already.

### **Express your support**

Let your loved one know that you care about them, are concerned for their well-being, and are there to support them. This can help quiet any doubts they may have and reassure them that you are on their side.

### **Advocate for treatment**

Ask your loved one if they are seeking help for their disorder. If they are not, express to them why you think professional treatment could be helpful. Offer to help them find treatment if they would like you to.

### **Listen**

Ask how your loved one is feeling, and listen to what they tell you. Don't try to guide the conversation too much or downplay their challenges. Sometimes people just need to be heard, and they will notice whether or not you are truly listening.

### **Give them space**

Give your loved one space when they need it. Do not push them to talk about their disorder or treatment, and don't pressure them to stop their compulsive behaviors. Leave the exposure and response prevention exercises to your loved one and their clinician.

### **Don't enable**

Supporting your loved one is not the same thing as enabling their behavior. Do not help your loved one perform their compulsions or engage in their rituals to ease their anxiety. This will only make it more difficult for them to change their behaviors.

**Involve them in plans**

Invite your loved one to join in social events and gatherings, either with a group or just between the two of you. Continue to socialize with them as you have in the past. This will help reassure them that your relationship has not changed because of their disorder.

**Treat them with respect**

Your loved one has not changed just because they are experiencing a mental health disorder. They are still the same person they were before. Treat them with the same respect and dignity you would anyone else, and do not patronize or talk down to them.

**Take care of yourself**

Your well-being matters just as much as your loved one's. Know your limits and seek support if you need it. Join support groups, check out community services, and seek professional guidance if you think it would be helpful. Don't let your whole life revolve around your loved one's condition.

**Don't make assumptions**

Even if you know a lot about OCD, do not make assumptions about your loved one's experiences. Ask questions and seek to understand their situation rather than telling them what to do.

**Don't criticize or blame**

Criticizing your loved one's behavior or blaming them for their situation will not help anyone. Be supportive in any way possible, and understand that they did not choose the challenges they are experiencing.

**Celebrate their progress**

Let your loved one know that you are proud of their progress both in and out of treatment. Celebrate their "wins" and successes in recovery. Encourage them to keep going!

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