

Obsessive-compulsive disorder (OCD) is characterized by repetitive, unwanted, intrusive thoughts (obsessions) and irrational, excessive urges to do certain actions (compulsions). Although people with OCD may know that their thoughts and behavior don't make sense, they are often unable to stop them.

Symptoms typically begin during childhood, the teenage years or young adulthood, although males often develop them at a younger age than females. More than 2% of the U.S. population (nearly 1 out of 40 people) will be diagnosed with OCD during their lives. If a parent or sibling has an obsessive-compulsive disorder, there's close to a 25% chance that another immediate family member will have it.

Symptoms

Just like with any mental illness, people with obsessive compulsive disorder experience symptoms differently. Most people have occasional obsessive thoughts or compulsive behaviors.

In an obsessive-compulsive disorder, however, these symptoms generally last more than an hour each day and interfere with daily life. Obsessions are intrusive, irrational thoughts or impulses that repeatedly occur.

Compulsions are repetitive acts that temporarily relieve the stress brought on by an obsession. Like obsessions, people may try not to perform compulsive acts but feel forced to do so to relieve anxiety.

Obsessions may include:

- Thoughts about harming or having harmed someone.
- Doubts about having done something right, like turning off the stove or locking a door.
- Unpleasant sexual images.
- Fears of saying or shouting inappropriate things in public.

Compulsions may include:

- Hand washing due to a fear of germs.
- Counting and recounting money because a person is can't be sure they added correctly.
- Checking to see if a door is locked or the stove is off.
- "Mental checking" that goes with intrusive thoughts is also a form of compulsion.

Causes

The exact cause of obsessive-compulsive disorder is unknown, but researchers believe that activity in several portions of the brain is responsible. More specifically, these areas of the brain may not respond normally to serotonin, a chemical that some nerve cells use to communicate with each other. Genetics are thought to contribute to the likelihood of developing.

Diagnosis

The sudden appearance of symptoms in children or older people merits a thorough medical evaluation to ensure that another illness is not causing of these symptoms.

To be diagnosed with OCD, a person must have must have:

- Obsessions, compulsions or both.
- Obsessions or compulsions that are upsetting and cause difficulty with work, relationships, other parts of life and typically last for at least an hour each day.

Treatment

For many, a combination of medicine and therapy is superior to either approach alone. While medicine may work directly on the brain, the therapies are believed to help retrain the brain to recognize "false threats."

Medication. The most common type of medications used to treat OCD are antidepressants. Treating OCD with antidepressants often takes longer to take effect than treating depression. Also, these medicines must sometimes be given in larger doses and for a longer period of time than for depression.

Psychotherapy. There are two types of psychotherapies that are helpful for treating OCD:

- **Exposure and response therapy (ERT).** ERT exposes a person to the cause of their anxiety. For example, a person with a fear of germs may be asked by a doctor or therapist to put their hand on something considered dirty, such as a doorknob. Afterwards, they will refrain from washing their hands. The length of time between touching the doorknob and washing hands becomes longer and longer.
- **Cognitive behavioral therapy (CBT).** CBT focuses on the thoughts that are causing distress, and changing the negative thinking and behavior associated with them. For obsessive-compulsive disorder, the goal of this therapy is to recognize negative thoughts and, with practice, gradually lessen their intensity to the point of harmlessness.

Complimentary Health Approaches

Aerobic exercise is a key complimentary intervention that can work to improve the quality of life for people with OCD. Exercise can work to naturally reduce the baseline level of anxiety a person experiences.

See more at: <http://www.nami.org/Learn-More/Mental-Health-Conditions/Obsessive-Compulsive-Disorder>

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