



**TIPS AND TRICKS ABOUT OBSESSIVE COMPULSIVE DISORDER (OCD)
IN CHILDREN AND ADULTS**

What is OCD?

Obsessive Compulsive Disorder is a neuropsychiatric disorder, which means that it originates in the brain and is not caused by the environment. The brain causes a "hiccup" that makes you think of something obsessively, causing you to become very uncomfortable and anxious. The brain then tricks you into believing you have to do something, a certain way (compulsion), to alleviate your distress. The OCD cycle begins with obsessive thinking, which results in increased anxiety and discomfort, that then compels you to complete a compulsion; this can happen repeatedly, which interferes with the ability to function in your daily activity. The obsessions and compulsions are not logical or even related sometimes, which makes OCD very overwhelming, confusing, and frustrating!

What are Obsessions?

Obsessions are uncontrollable, recurrent, and persistent thoughts, impulses, and urges that come into the mind, are unwanted, and significantly interfere with your ability to function. An individual is likely to develop multiple obsessions; the nature of these obsessions can change and they can attach to situations/people/issues of concern to them.

What are Compulsions?

Compulsions are rituals that are propelled by obsessions that follow very rigid rules. They are created as an attempt to neutralize the obsession, to decrease the anxiety caused by the obsession, and in hopes of avoiding or preventing a dreaded imagined outcome. Compulsions tend to work in the immediate short-term to reduce anxiety, but the individual quickly find him/herself having to increasingly engage in the compulsion ritual to decrease the anxiety. The individual begins to believe that the compulsion is necessary to escape the fear of the obsession and its related discomfort.

Common Types of Obsessions and Compulsions

<u>Obsessions</u>	<u>Compulsions</u>
<ul style="list-style-type: none"> • Fear of germs and/or contamination 	<ul style="list-style-type: none"> • Washing/ cleaning
<ul style="list-style-type: none"> • Fear of getting sick or dying 	<ul style="list-style-type: none"> • Repeating, doing over, erasing, and/or rewriting
<ul style="list-style-type: none"> • Worries of something bad happening 	<ul style="list-style-type: none"> • Asking for reassurance, confessing, or apologizing
<ul style="list-style-type: none"> • Intrusive thoughts or images of hurting someone or being hurt by someone 	<ul style="list-style-type: none"> • Performing an activity in a specific number of times or doing an activity in even or odd numbers
<ul style="list-style-type: none"> • Intrusive thoughts or images about inappropriate sexual interactions 	<ul style="list-style-type: none"> • Ordering, arranging, checking, and/or counting
<ul style="list-style-type: none"> • "Bad" thoughts 	<ul style="list-style-type: none"> • Tapping, touching
<ul style="list-style-type: none"> • Something just isn't right (clothes, feeling, experience, voice, etc.) 	<ul style="list-style-type: none"> • Praying
<ul style="list-style-type: none"> • Saving/collecting items 	<ul style="list-style-type: none"> • Hoarding

*Adapted from Aureen Pinto Wagner (2007)

OCD Symptoms Increase With:

1. Avoidance

The individual wants to avoid anything that may trigger the obsession and consequently the compulsion. As a result, they begin to avoid specific situations, people, or objects that they believe can trigger their obsessive thoughts.

2. Doubt

OCD has been referred to as the "doubting disease" as it makes you feel that you must be absolutely certain in your specific thoughts and actions, in a manner that is impossible, relentless, and illogical.

3. Shame/Embarrassment

People do not want to share their obsessions and compulsions, or fear doing so, due to their feelings of shame/embarrassment. As a result, they live in a private struggle and may not receive help or know help is available.

4. Continually Performing the Compulsion

The more you do the compulsion when triggered by the obsession, the more you will believe that you must do the compulsion to be relieved of the anxiety. Therefore, the more you do the compulsion, the stronger the OCD becomes.

Facts About OCD:

- 1 of every 200 children in the United States have OCD.
- Mean age of onset is 10 years of age with a range from 6-11 years of age.
- Children can experience symptoms much younger, which is considered Early Onset OCD and is more common in males with a genetic family history of OCD, anxiety, or tics.
- 1/3 of adults who experience OCD experienced their first symptoms in childhood or adolescence.
- OCD symptoms tend to begin gradually and become progressively worse over the following 2 year period.
- For some, OCD symptoms can have a sudden onset following a transition or a trauma.
- OCD symptoms also can begin suddenly following a strep infection, which requires a specific treatment plan. Please be sure to notify your clinician if there has been a recent strep infection prior to the onset of OCD symptoms.

What is the Basis of OCD?

- It is a neurobiological disorder that has a genetic basis.
- It is believed to be related to neurotransmitter differences, primarily involving serotonin and possibly glutamate.
- It is likely to be related to an overly active brain circuit between the frontal cortex, striatum, and thalamus.
- Science is still learning about the basis of OCD!

OCD Treatment:

- Cognitive Behavioral Therapy (CBT) has been shown to be most successful in treating OCD and for some individuals, medication can prove to be very helpful in conjunction with therapy.
- CBT involves identifying, challenging, and changing maladaptive thoughts and therefore changing feelings and actions related to OCD.
- In CBT, there are several phases. It will begin with a thorough assessment of your OCD; you will be educated about OCD as it relates to you; you will learn cognitive skills to identify, examine, and talk back to OCD, as well as different ways to respond to the OCD thoughts; and eventually you will learn that the negative outcome that OCD made you believe would happen, does not occur! With this, OCD will lose its power, you will feel in control, and defeating OCD will feel great!
- Treatment can help significantly reduce OCD symptoms and decrease its interference in your life.

What You Need to Know About OCD:

- Obsessions are thoughts and they will not hurt you regardless of what they say.
- A goal of taking charge of OCD is to acknowledge the obsessions as thoughts and to decrease the power they are given.
- The more you avoid an OCD trigger, the stronger your associated discomfort.

- The more you face an OCD trigger, the weaker your associated discomfort.
- As you practice facing your OCD, without performing the compulsion or by doing something different from the compulsion, gradually you will adjust to the discomfort associated with OCD (...just like when your body adapts to jumping into a cool pool!).
- Anticipating your discomfort and the OCD thoughts may be worse than experiencing the actual trigger in reality.
- Develop realistic and encouraging self-talk.
- Use self-calming and relaxation skills to tolerate the discomfort of OCD until it lessens (..and it will!).
- Accept the OCD thoughts as OCD rather than labeling, judging, avoiding, or hiding them.
- Don't try to avoid/ignore the OCD thoughts and feelings, rather the goal is to begin to learn how to tolerate them and continually feel more in control of yourself.

Anxiety/OCD Resources

Websites:

- International OCD Foundation – www.ocfoundation.org
- The Anxiety and Wellness Center – www.anxietywellness.com
- Worry Wise Kids – www.worrywisekids.org
- Trichotillomania Learning Center – www.trich.org
- The Child Anxiety Network – www.childanxiety.net
- Anxiety and Depression Association of America – www.adaa.org
- UCLA Mindful Awareness Research Center – <http://marc.ucla.edu>

Parent Books/Readings:

- Freeing Your Child From Anxiety (2004) by Tamar Chansky
- What to do When Your Child has Obsessive-Compulsive Disorder by Aureen Pinto Wagner, Ph.D.
- Worried No More: Help and Hope for Anxious Children - Second Edition by Aureen Pinto Wagner, Ph.D.
- The OCD Answer Book by Patrick McGrath, Ph.D.
- Brain Lock by J. Schwartz
- The OCD Workbook: Your Guide to Breaking Free from Obsessive-Compulsive Disorder by B. Hyman and C. Pedrick

Child/Adolescent Books/Readings:

- Up and Down the Worry Hill: A Children's Book About Obsessive-Compulsive Disorder and its Treatment by Aureen Pinto Wagner, Ph.D.
- Talking Back to OCD by J. March
- Taking Control of OCD: The Ultimate Guide for Kids with OCD by Bonnie Zucker
- A Thought Is Just A Thought by Leslie Talley
- When My Worries Get Too Big by Karl D Buron
- Peaceful Piggy Medication by Kerry Lee MacLean
- Don't Rant & Rave On Wednesdays! by Adolf Moser
- David and the Worry Beast: Helping Children Cope with Anxiety by Anne Marie Guanci
- What To Do When Your Brain Gets Stuck by Dawn Huebner
- Indigo Dream Series by Lori Lite
- The Boy And The Bear by Lori Lite
- A Boy and a Turtle: Relaxation/Stress Management by Lori Lite
- Sea Otter Cove: A Relaxation Story by Lori Lite
- Mr. Worry: A Story about OCD by Holly L. Niner
- The Ant Hill Disaster by Julia Cook
- Anti Test Anxiety Society by Julia Cook

Smart Phone APPS

- Live OCD Free
- Mind Shift
- Calm
- Headspace