

## Obsessive Compulsive Disorders

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### Abstract

OCD is classified in the DSM-IV-TR as an anxiety disorder. It is characterized by distressing intrusive obsessive thoughts and / or repetitive actions which may be physical or mental acts that are clinically significant. Obsessive-compulsive disorder is a chronic mental illness that can have a debilitating effect on daily functioning. A body of research reveals altered sleep behavior in OCD sufferers; however, findings are inconsistent and there is no consensus on the nature of this relationship. The current study investigated whether individuals with delayed sleep phase disorder report elevated symptoms of OCD and have greater difficulty inhibiting intrusive thoughts than do individuals without Delayed sleep phase disorder. Sleep disturbances are also prevalent in obsessive-compulsive disorder as up to 48% of patients report these disturbances Previous research in OCD suggests that there is an association between specific sleep behaviors and clinical characteristics such as the severity of obsessive- symptoms, treatment resistance and age of onset of the disorder.

**Keywords:** OCD. Thoughts. obsessions, Anxiety

### Introduction: Epidemiology

Current estimates of lifetime prevalence are generally in the range of 1.7-4%The overall prevalence of OCD is equal in males and females symptoms usually begin in individuals aged 10-24 years,

### Causes

The cause of OCD is not known; however, the following factors are relevant.

1. Genetic
2. Infections
3. Other neurological conditions :
4. Stress
5. Interpersonal relationships

OCD symptoms can interact negatively with interpersonal relationships,

<b>Obsessions</b>	<b>Commonly Associated Compulsions</b>
Fear of contamination	WASHING, CLEANING
Needed for symmetry, precise arranging	Ordering, arranging, balancing, straightening until "just right"
Unwanted sexual or aggressive thoughts or images	Checking, praying, "undoing" actions, asking for reassurance
Doubt (e.g., gas jets off doors locked)	Repeated checking behaviours
Concerns about throwing away something valuable	Hoarding

### Signs and Symptoms

#### Common Obsessions include the Following:

- Contamination
- Safety
- Doubting one's memory or perception
- Scrupulosity (need to do the right thing fear of committing a transgression often religious)
- Need for order or symmetry
- Unwanted, intrusive sexual/aggressive thought

#### Common Compulsions include the Following:

- cleaning/washing
- checking (checking locks, stove, iron, safety of children)
- Counting/repeating actions a certain number of times or until it 'feels right'
- Arrangeing objects
- Touching/tapping objects
- Hoarding
- Confessing/seeking reassurance
- list making

### **Skin Findings in OCD may include the following**

- Eczematous eruptions related to excessive washing
- Hair loss related to trichotillomania or compulsive hair pulling
- Excoriations related to neurodermatitis or compulsive skin picking

### **Treatment**

#### **1. Pharmacotherapy**

SSRIs (fluoxetine, fluvoxamine, sertraline, paroxetine, citalopram, escitalopram)  
Clomipramine , serotonin norepinephrine reuptake inhibitor (SNRI).

#### **2. Behavior therapy**

#### **3. Meditation and relation therapy**

#### **4. Psychotherapy**

### **Surgical Care**

- Cingulotomy or deep brain stimulation
- Transcranial magnetic stimulation (TMS)

### **Nursing Management**

1. Try to keep them at low stress levels, especially at the start of OCD treatment.
2. Make sure that you set rigid rules for the patient's behavior and see to it that they are enforced consistently.
3. Encourage them to comply with behavior therapies and medication.
4. While it is a common instinct of OCD patients to seek for reassurance so as to reduce anxiety, do not allow them to indulge this habit.
5. Try to avoid comparing them with others, with or without OCD, as those with an OCD may already suffer from a low self-esteem.
6. Be encouraging and supportive, and help the patient set reachable goals in dealing with OCD.

### **Nursing Diagnosis**

1. Increased Anxiety
2. Impaired coping ability

3. Altered communication pattern
4. Low self-esteem
5. Impaired Judgement
6. Self care deficit
7. Altered sleep pattern

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