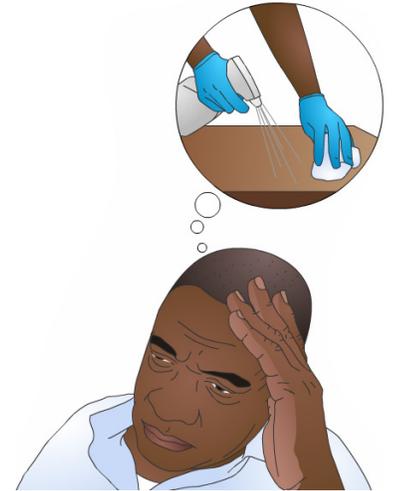


Introduction

Obsessive compulsive disorder, or OCD, is a type of anxiety disorder. OCD causes repeated upsetting thoughts called obsessions. To try and get rid of these thoughts, people with OCD perform the same actions over and over again. These repeated actions are called compulsions. If left untreated, OCD can take over a person's life. But OCD often is effectively treated using a combination of medicines and therapy.

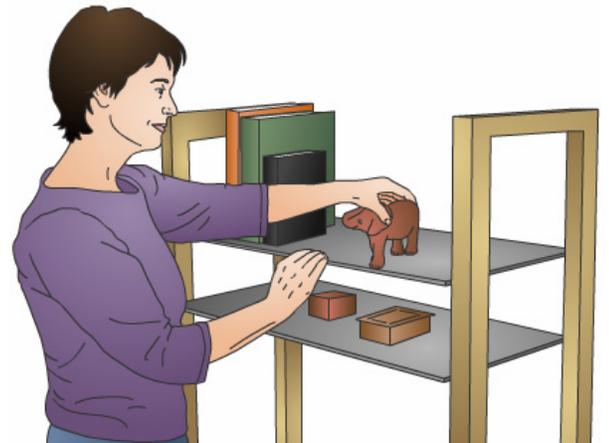
This reference summary explains what OCD is, as well as its symptoms and causes. It also discusses how obsessive compulsive disorder is diagnosed and treated.



Obsessive Compulsive Disorder

Obsessive compulsive disorder, or OCD, is an anxiety disorder. OCD causes a person to have exaggerated thoughts and fears, called obsessions. They have no control over these thoughts and fears.

Obsessions lead a person with OCD to do repetitive behaviors or rituals, called compulsions. Compulsions are acted on to prevent anxiety related to a person's obsessions. A person with OCD feels required to perform these actions because doing so provides temporary relief from obsessive thoughts. They feel they have no control over their compulsive behavior.



Obsessions and compulsions often center on a theme. OCD may cause a person to obsess about germs. As a result, the person compulsively washes his or her hands a lot. Similarly, OCD may cause a person to obsess about having things in order. The person may compulsively arrange things on a shelf or counter until they are facing the same direction or are evenly spaced.

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People who have OCD may recognize that their obsessions are not reasonable. They may try to ignore their obsessions or stop doing the rituals that follow them. But, ignoring the urge to do the ritual may increase a person's anxiety. OCD is a chronic, or ongoing, condition. It is considered a lifelong illness. Left untreated, obsessions and the need to perform rituals can take over a person's life.

Symptoms

The symptoms of OCD include a person's obsessions and compulsions. These symptoms are different from person to person depending on what specific obsession or compulsion the person has. The symptoms of OCD often begin slowly during childhood or teen years. OCD symptoms may change in severity throughout a person's life. They usually get worse during times of stress.

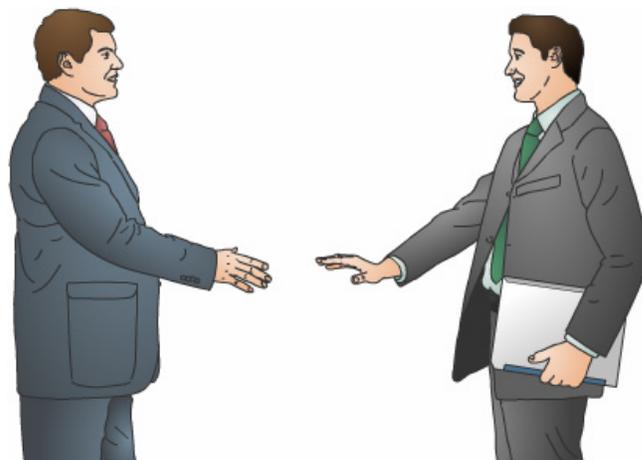
Some common obsessive thoughts and feelings include the following examples:

- Suspicion that a door was left unlocked or stove wasn't turned off.
- Worry about items that are not orderly or facing the same direction.
- Distress over images of hurting their child.

Common compulsion symptoms include:

- Washing hands excessively.
- Counting in certain patterns, such as by twos or multiples of five.
- Checking and rechecking doors to make sure they're locked.

Obsessions and compulsions can lead to changes in behavior. For instance, a person who is afraid of germs may avoid shaking hands or touching objects. This often causes problems at work as well as in his or her social life.



Obsessions and compulsions may also lead to physical symptoms, like:

- Chapped skin from repeated hand washing.
- Hair loss or bald spots from hair pulling.
- Shouting vulgar words in inappropriate situations.

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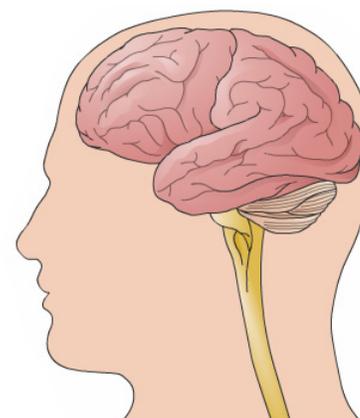
People with OCD can't control these unwanted thoughts and compulsions. They don't get pleasure when performing the behaviors or rituals. But they do get brief relief from the anxiety the thoughts cause. The symptoms of OCD can be severe and time consuming. People with OCD spend at least 1 hour a day on obsessive thoughts and rituals.

OCD is a disabling condition that threatens a person's quality of life. People may spend so much time on their rituals that they get little else done in a day. For example, a person who is obsessed with keeping things in order may spend all of his or her time arranging and rearranging items in the house. He or she may do this instead of other activities, like going to work or spending time with friends and family.

Causes and Risk Factors

The exact cause of obsessive compulsive disorder is unknown. But it is likely that several factors are involved.

OCD may be related to biology. This includes changes to the body's chemistry or the way a person's brain functions. OCD could also involve a person's genetics, which are the inherited traits they received from their parents.



OCD may be caused by a lack of serotonin in the brain. Serotonin is a chemical produced by the brain to send messages to different nerves. Low levels of serotonin are considered to be a cause of depression. A lack of serotonin may also contribute to OCD.

OCD could be related to environment. Environment can include a person's place of work, community or residence. OCD may be related to the habits a person learns in these different settings.



Although the exact causes of OCD are unknown, there are certain things that seem to increase a person's risk for developing the disorder. These are known as risk factors.

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A family history of OCD is one risk factor. If a person has a parent or other blood-relative with the disorder, their risk for developing OCD is increased.

Stressful life events are another risk factor for OCD. People who react strongly to stress have an increased risk of developing OCD. A strong reaction to stress may trigger the uncontrollable thoughts, behaviors and emotional anguish associated with obsessive compulsive disorder.

Diagnosis

If your health care provider believes that you have obsessive compulsive disorder, he or she may run several medical and psychological tests and exams.

These can help your health care provider make a diagnosis or rule out other problems that could be causing your symptoms.



Exams and tests generally include:

- A physical exam to check your body's health.
- Laboratory tests to see if another health condition is causing your symptoms.
- A psychological evaluation to check your mental and emotional health.

During the psychological evaluation, your health care provider will want to know about your symptoms. Be prepared to talk about:

- When they started.
- How severe they are.
- How they affect your daily life.
- Whether you've had similar problems in the past.

In order to be diagnosed with OCD, you, your obsessions and your compulsions must meet specific requirements.

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In order to receive a diagnosis of OCD, you must first meet these diagnostic criteria:

- You experience obsessions, compulsions or both.
- You understand that your obsessions and compulsions are excessive or unreasonable.
- Your obsessions and compulsions severely interfere with your daily life.

Your obsessions must meet these criteria:

- Recurring thoughts or impulses interfere with your life, causing distress.
- Your thoughts are not simply worries about real problems in your life.
- You try to ignore or restrain thoughts or impulses.
- You know the thoughts or impulses are a product of your own mind.

Your compulsions must meet these criteria:

- You feel compelled to perform repetitive behaviors, like hand washing, or mental acts, like counting.
- You engage in these behaviors or mental acts to prevent or reduce anxiety about some event or situation.



OCD can be difficult to diagnose. The symptoms of OCD may be similar to other mental health disorders, such as generalized anxiety disorder, depression and schizophrenia. But by working closely with your health care provider, you can get the correct treatment.

Treatment

Treatment for OCD usually consists of psychotherapy, medications or both. Many people with OCD find the most relief from their symptoms by combining medication and therapy. Psychotherapy is also called talk therapy. It uses methods such as discussion, listening and counseling to treat mental, emotional, personality and behavior disorders.

A type of behavioral therapy known as exposure and response prevention is very useful for treating OCD. In this approach, a person is exposed to whatever triggers the obsessive thoughts. They learn ways to avoid doing the compulsive rituals and how to deal with their anxiety.

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Psychiatric medications are often used to help control the obsessions and compulsions of OCD. Antidepressant medications are usually tried first. These medications increase the levels of serotonin in the brain. If you have OCD, it is possible that you have low levels of this chemical in your brain.

Your health care provider may have you try several medications before finding one that improves your symptoms. It is possible that you will need to take medication for the rest of your life. You should never start or stop using a medication without first checking with your health care provider.



Medications come with possible health risks and side effects. Talk to your health care provider about the risks or side effects associated with OCD treatments. You can work together to decide which treatment is right for you.

Treatment for obsessive compulsive disorder can be difficult. Sometimes treatment does not lead to a cure. You may need treatment for the rest of your life. But treatment can help you control your symptoms.

In rare and severe cases of OCD, brain surgery may be attempted to help with the symptoms. But surgery is the last resort to treating OCD.



Summary

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