

23 - Obsessive compulsive disorder

Obsessive-compulsive disorder

© SPMM Course patient may drop fainting with low BP and bradycardia. There is a high prevalence of the condition among first-degree relatives of affected people (Marks 1988) About 5% of adults have a fear of the dental procedures. It can become so severe that all dental treatment is avoided, and dangerous caries develops (Gale and Ayer 1969). DSM-IV specifies that in adults, but not children, an appreciation of the unreasonable or excessive nature of the fear to diagnose specific phobias. The duration criteria of 6 months is specified only for children, not adults; as many irrational fears in children may be transient and developmental (this is changed in DSM-V, see the box above). Obsessive-compulsive disorder OCD is characterised by obsessional thinking, compulsive behaviour and often associated with marked anxiety and depression. Diagnosis according to ICD10 obsessions (thoughts, images, or ideas) and compulsions share the following features, all of which must be present: (1) Acknowledged as originating in the mind of the patient (2) Repetitive and unpleasant; at least one recognised as excessive or unreasonable (3) At least one must be unsuccessfully resisted (although resistance may be minimal in some cases) (4) Carrying out the obsessive thought or compulsive act is not intrinsically pleasurable

Obsessions can occur in several forms such as thoughts, ruminations, doubts, impulses and phobias. Obsessional slowness can occur as a result of Obsessional doubts or compulsive rituals. According to ICD-10, either obsessions or compulsions (or both) present on most days for a period of at least two successive weeks. Common symptoms: Checking (63%), washing (50%), fear of contamination (45%), doubting (42%), bodily fears (36%), counting (36%), insistence on symmetry (31%), aggressive thoughts (28%) (Data from OxfordHandbook of Psychiatry) Compulsive hoarding may be a neurobiologically distinct form of obsessive-compulsive disorder. Hoarding is notoriously difficult to treat by either psychological or pharmacological means. Symmetry obsessions tend to be chronic and treatment resistant. DSM-5 AND OCD A new exclusive chapter has been created to describe obsessive-compulsive and related disorders (not clubbed with anxiety disorders anymore). 2 new diagnoses are included in this chapter.

1. Hoarding Disorder with core symptom being the inability (or persistent difficulty) to discard or give up possessions, regardless of their actual value.

2. Excoriation Disorder (dermatillomania) with core symptom of compulsively picking one's own skin for no apparent reason.

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