

CHAPTER 1

What Is Obsessive–Compulsive Disorder?

Chapter Review

1. What are the diagnostic criteria for obsessive-compulsive disorder?

Diagnostic Criteria for Obsessive–Compulsive Disorder

- A. Either obsessions or compulsions
- B. At some point during the course of the disorder, the person has recognized that the obsessions or compulsions are excessive or unreasonable (this does not apply to children).
- C. The obsessions or compulsions cause marked distress, are time-consuming (take more than 1 hour a day), or significantly interfere with the person's normal routine, occupational (or academic) functioning, or usual social activities or relationships.
- D. OCD is not diagnosed when an apparent obsession or compulsion is a primary feature of another mental disorder and restricted to it.
- E. The disturbance is not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition.

Use the specifier "with poor insight" if the person does not recognize, for most of the time during the current episode, that the obsessions and compulsions are excessive or unreasonable.

From the *Diagnostic and Statistical Manual of Mental Disorders* (APA, 2000).

Obsessions

- Obsessions are recurrent and persistent thoughts, images, or impulses that are intrusive, inappropriate, and cause marked anxiety or distress.
- The obsessions are not simply excessive worries about real-life problems.

(continued)

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- Attempts are made to ignore or suppress such thoughts, impulses, or images, or to neutralize them with some other thought or action.
- The person recognizes that the obsessions are a product of his or her own mind (not imposed from the outside, as in thought insertion).

Compulsions

- Compulsions are repetitive behaviors or mental acts that the person feels driven to perform in response to an obsession, or according to rules that must be applied rigidly.
- The compulsions are aimed at preventing or reducing distress or preventing some dreaded event or situation; however, they are not connected in a realistic way with what they are designed to neutralize or prevent or are clearly excessive.

Chapter Review Test Questions

1. Which of the following best reflects the definition of obsessions, according to diagnostic criteria such as those of the DSM?
 - A. Recurrent and persistent images
 - B. Recurrent and persistent impulses
 - C. Recurrent and persistent thoughts
 - D. Recurrent and persistent thoughts, images, or impulses

Answer: D

2. Which of the following describes common compulsions?
 - A. Aggressive impulses and images
 - B. Checking and washing
 - C. Contamination fears and washing
 - D. Harming fears and reassurance seeking

Answer: B

Talking Points

Persons with OCD have fearful beliefs that are excessive or unreasonable (e.g., "Something bad will happen to me or someone else if I don't conduct this ritual." "I will contract AIDS if I visit the doctor's office."). *Why are these not considered delusions and classified under a psychotic disorder?*

This question asks participants to consider the differences between psychotic and nonpsychotic features, or what used to be couched as the distinction between psychosis and neurosis. Consider discussing the following distinctions:

- One diagnostic criterion for OCD requires that the person with OCD recognizes that the obsessions or compulsions are excessive or unreasonable at some point during the course of the disorder; however, this insight occurs on a continuum in clinical populations. In some individuals, insight may be lost, and the obsession may reach delusional proportion (e.g., the belief that one has actually caused the death of another by obsessing about it or failing to do a compulsion a certain way). The specifier "with poor insight" is to be used in cases on this boundary between obsession and delusion.
- The ruminative delusional thoughts and stereotypic behavior that occur in schizophrenia are distinguished from obsessions and compulsions in that they are ego-dystonic and not subject to reality testing.
- Most sufferers of OCD can recognize that their fears are unreasonable or excessive. They simply cannot control them and the fear they engender.

Chapter Reference

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revised). Washington, DC: American Psychiatric Association.