

Cognitive-Behavioural Therapy (CBT) for Obsessive-Compulsive Disorder (OCD)

Jason Isaacs, Behaviour Modification and Behaviour Therapy,
Faculty of Health, York University

Introduction

- Obsessive Compulsive Disorder (OCD) is an anxiety disorder that causes one to have unwanted obsessions (thoughts) and compulsions (rituals).



Organizing – www.playbuzz.com

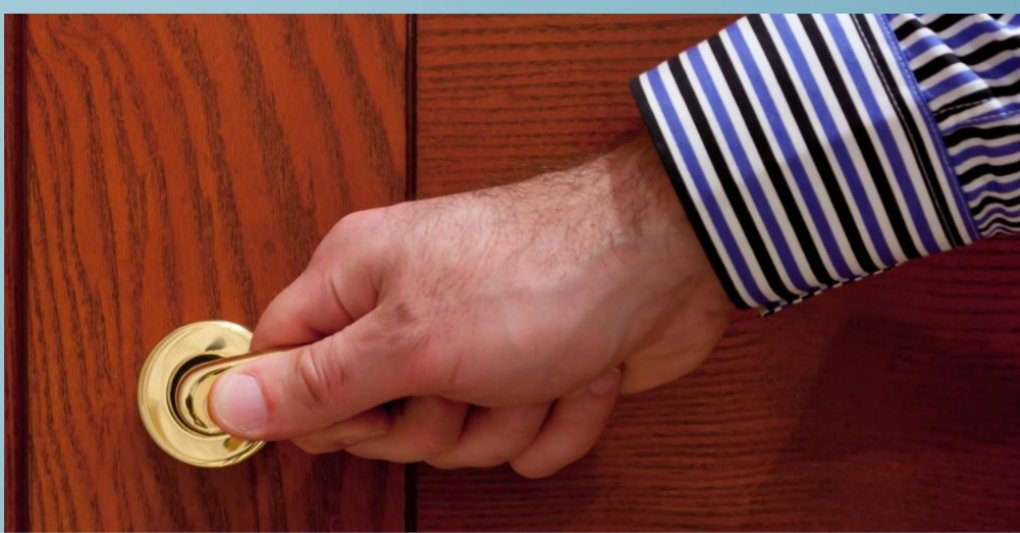


Washing – www.psychcentral.com

- Cognitive Behavioural Therapy (CBT) is a common treatment for OCD.
- This project evaluates the strengths and weaknesses of two specific CBT techniques for OCD:
(1) Exposure plus Response Prevention (ERP)
(2) Thought Stopping
- Additionally, this project will focus on broad strengths and weaknesses of CBT for OCD.

(1) Exposure Plus RP

ERP = Expose client to thoughts or situations that arouse anxiety, then prevent the client from responding to anxiety with compulsive rituals.



Checking door (a compulsion that is prevented in ERP) – www.wisegeek.com

STRENGTHS:

- Helps with various obsessions and compulsions – Best with “washers” and “checkers”.
- Physiological Benefits – Heart rate stopped rising when exposed to anxiety-provoking situations.
- Long-Lasting Effects – Follow up at 1-2 years.
- Comorbidity – Reduced obsessions and compulsions in people with both OCD and depression.

WEAKNESSES:

- Resistance – “Washers” initially resistant to therapy.
- Length of time – ERP can take a long time.
- Different results for different sub-groups – People with sexual/aggressive thoughts are harder to treat.

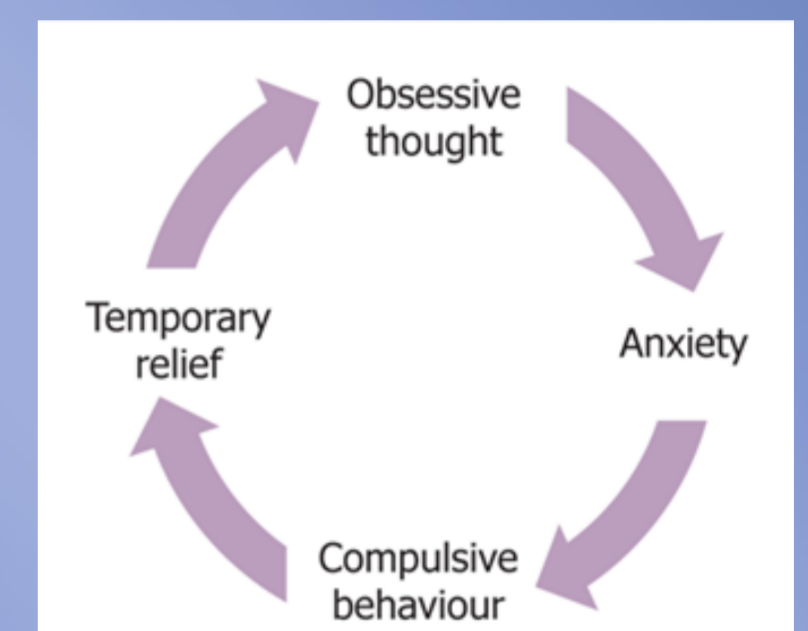
(2) Thought Stopping

Thought Stopping =

Reducing the impact of maladaptive thoughts by interrupting them and substituting them for more adaptive thoughts (e.g. not everything needs to be perfect while highlighting).

STRENGTHS:

- Long-Lasting Effects – Follow-up at 1-2 years.
- Imaginal Thought Stopping – Also effective.



Thought stopping tries to break this cycle
www.mind.org.uk

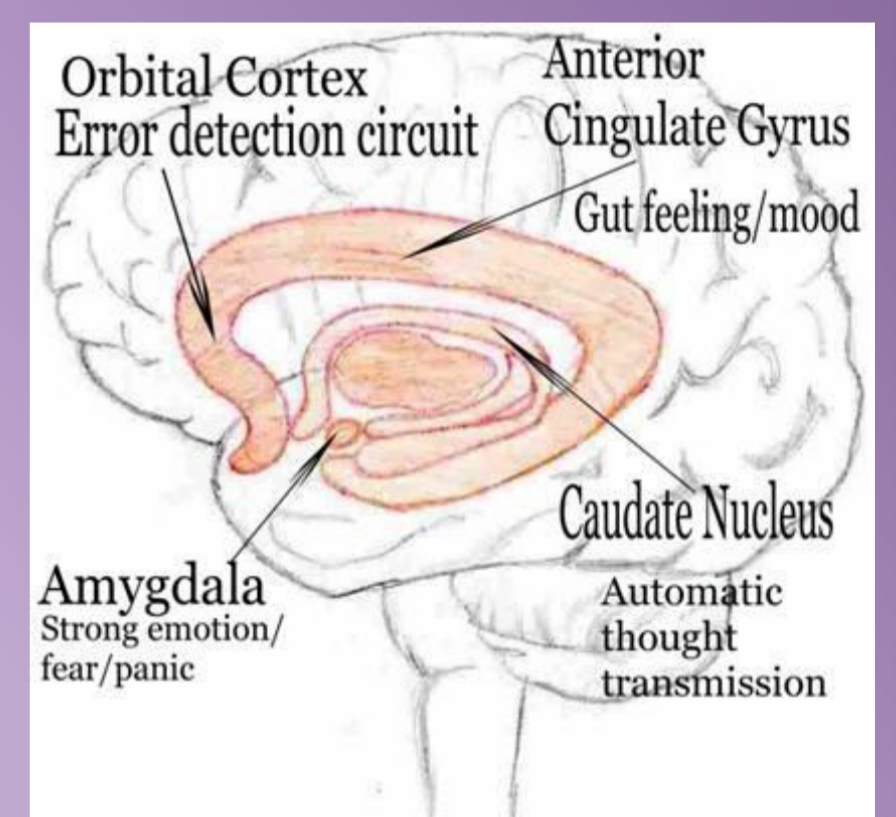
WEAKNESSES:

- Unsuccessful for many patients.
- Generates unpredictable results.

A Broader Perspective

STRENGTHS – CBT FOR OCD:

- CBT is best therapy for OCD (e.g. compared to relaxation or psychodynamic).
- CBT is as effective as medication (for patients in CBT, results do not improve when medication is added).
- Biological Benefits – Neural changes in chemicals and structures related to OCD.



www.anxiety specialist.co.uk

WEAKNESSES – CBT FOR OCD:

- Time consuming.
- Better suited for some obsessions and compulsions over others (e.g. “hoarding” is most resistant).
- Large chance of relapse for clients not involved in relapse prevention plans.

Conclusion/Discussion

- ERP and thought stopping have both proven to be **effective techniques**, but not in all situations.
- CBT is a **first-line treatment** for OCD, alongside meds.
- There are still **gaps in the literature**:
 - 1) Treatment guidelines and procedures are ambiguous. Easier to implement individual techniques.
 - 2) Treatment focuses on obsessions OR compulsions.
 - 3) Need research on some populations (e.g. children).