Obsessive-Compulsive Disorder: Internal, External Causes and Treatments

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Abstract: This paper mainly focuses on Obsessive-compulsive disorder and its related information. The disorder happens all over the world and among all age groups. At the same time, the rate of occurrence of OCD has increased over the years. This article has discussed how OCD has been defined and examined, as well as both aspects of causes, internal and external, from some major factors. OCD patients may struggle with obsessive thoughts and compulsive behaviors, most of which would influence their daily routines and interactions with people. Yet the symptoms won't be unable to reduce. Suggestions such as domestic support and social welfare regarding OCD have been separately analyzed. Meantime, the 3 most common treatments Cognitive behavioral therapy, Exposure and response prevention, and Selective serotonin reuptake inhibitors have been mentioned. What has been realized is the specific root cause for OCD hasn't been found and more causes may have not been discovered yet. To this end, more investigations, possibilities of treatments or combinations may be evaluated in the future to gain further acknowledgements and better.

Keywords: obsessive-compulsive disorder, diagnostic criteria, cause, treatment

1. Introduction

Nowadays, the prevalence of OCD, obsessive-compulsive disorder, has increased globally. Based on the incidence rate, 1 in 100 people in the global environment would get obsessive-compulsive disorder, where the name directly indicates the symptoms of obsessive thinking and compulsive acting [1]. The prevalence has spread across diverse age groups, yet men's late adolescence and women's young adulthood occupied more percentage of the related population [1]. Therefore, the situation has triggered the siren and the need for attention on the control in time should be aware.

Nevertheless, the symptoms of OCD for people could be hidden under normal reactions intentionally or unintentionally, which could be indirect factors contributing to difficulties of timely detention and immediate treatments and might lead to later impacts of lagging of recovery or enhancement in severity. Therefore, from the definition, causes, suggestions, and treatments, the article has discussed different aspects of OCD, giving an overview understanding of it. This paper first demonstrates the meaning and criteria for the evaluation of the condition. The internal (inner influence) and external (environmental impacts) reasons have been brought up with a focus on some typical cases. As a further illustration, the suggestions for both family's and society's involvements have been analyzed. At the same time, multiple selections of interventions, for example, therapy and medication, have been illustrated in the content.

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2. Definition, Diagnostic Criteria and Impacts

2.1. Definition

Obsessive-compulsive disorder, which is the full name for OCD, is a common psychological disorder where the patient may experience obsessive thoughts and compulsive actions [2].

OCD is broadly considered as a serious psychiatric disorder that needs to be aware of. It could be divided into 3 parts [3]. First, people who have OCD could hold persistent thoughts, also recognized as obsessions, that are intrusive and disturbing to influence one's life and cause anxiety as well as other negative feelings. People could find themselves having difficulties resisting these ideas [4]. and to that end, these series of intrusive ideas may lead to repetitive behaviors, which could be referred to as compulsions, the second component of the condition, that aims for reducing distress and preventing further dangerous actions. For instance, people might wash their hands an excessive time for one day, or check whether the doors are closed over and over again even if they are aware the number of times spent on these is unreasonable, but they will still continue in order to reduce their anxieties and concerns. Apart from these two, symptoms would involve another component, extensive avoidance, since patients tend to blench in front of the former 2 parts, obsessions and compulsions.

2.2. Diagnostic Criteria and Patients' Span

People who suffer from obsessive-compulsive disorder would spend over 1 hour per day enduring marked distress that may affect severely the person's daily routine, including their occupational or academic functioning or common social activities, interactions, and relationships [2]. Yet, if another Axis I disorder coexists, such as an eating disorder or depressive disorder, the content of the disorder is not limited to that. Meantime, neither the general medical state nor the direct physiological impacts are the cause of the condition's disturbance.

OCD occurs around the world. Anyone would have the chance to develop OCD. Hence the the attention among society needs to be attracted to prevent the further development of the mental health disorder. OCD has approximately the same incidence rate in gender, but most males and females tend to develop distinct types of OCD. As an example, more men have sexual obsessions while more women have compulsive washing [1]. The mean figure of age of occurring is males' late adolescence and females' early adulthood of 20s, yet this is not referring to a denial of the possibility for the elders and teenagers.

2.3. Impacts

As mentioned above, the obsessive thoughts of OCD symptoms would bother the patient's daily routine, as well as the normal functioning of social interactions. The repetitive actions may be considered excessive, yet people won't be able to control their behaviors with the anxiety bear in mind. The life quality of satisfaction will decline as people are suffered from and are distracted by negative sensations, thus will no longer have the capability to participate in various activities as usual. The impact is not only focused on the personal self but also will inflict distress on the related people, such as parents and friends, for the reason that they will be concerned and will have to distribute more attention to the patients [5]. Meantime, the poor insight of OCD patients would be linked to emotional awareness [6], particularly in recognition and empathic concerns.

Patients may also increase their frequency of health care utilizations since they will spend more time receiving treatments and doing therapy [1]. This can also be seen as a burden from the economic aspects as more personal disposable income will be input into the medications. Poor families or individuals would have difficulty affording the bills.

3. Causes

3.1. Internal Causes

3.1.1. Genetic Factor

As for internal causes of obsessive-compulsive disorder, the genetic factor including gene structure and inheritance would be the first consideration that came into mind. Multiple pieces of evidence have suggested that like many other disorders, OCD shares genetic features in the population [7]. OCD may also be influenced by family inheritance. This implies that one of the reasons of obsessive-compulsive disorder might be genetic factors. Some of the neurobiological mechanisms have been identified, and the genetic architecture is gradually being examined [8]. In the future, the integration of global mental health and the more developed approaches and measures used will help to improve the knowledge of OCD, its genetic root cause, and clinical outcomes [8].

3.1.2. Personality Traits

Personality traits, an essential component for human beings, could also be a factor in OCD. Recently, a study at Brown [9] has also preliminarily supported that personality traits could be a potential cause. So, a person's unique qualities might have a different impact on whether or not the symptoms will manifest. Yet, it is uncertain that the characteristics will have an impact on how severe the OCD is. On the other hand, observation [6] showed that extent of poor insight of patients will as well influence the severity of the disorder's symptoms. But both papers have mentioned that this may require deeper investigations such as stating thin the future to ensure the relationship has yet to be stated.

3.2. External Causes

3.2.1. Former Experiences

Here the association between the former experiences and having OCD is discussed. People may go through some stressful incidence or trauma such as a car accident or a natural disaster in the past, thus will influence their emotions and mood, leading to the occurrence of OCD.

Stressful experiences, which is also called SEs, are experiences that disrupt one's life [10]. These could include non-traumatic types, such as family or occupational difficulties, as well as traumatic types, such as natural disasters and injuries. However, the identification of the categories is quite subjective, so stressful experiences is their general designation. Throughout the years, it has been indicated that SEs might be associated with the development of the obsessive-compulsive disorder [10]. SEs have influences on various mental health conditions, including depression and bipolar disorder. This illustrates from another perspective that SEs have impacts on mental health in a multi-dimensional way, which could be further considered as that they might either directly or indirectly promote the possibility of having OCD. Yet this may also be evaluated combining with stress sensitivity since this varies among different individuals and would determine how a person handles the experiences to some extent.

Nevertheless, although the possibility still exists, what needs to be aware of is that currently, the influence of SEs is not assured, as the association between SEs and a disorder that comorbid with OCD may be the real cause of the relationship.

3.2.2. Childhood Environment

Apart from the experiences, there is another domestic factor that might influence the development of OCD -- the childhood living environment. Children between 5-15 years old have a prevalence of 0.25%

of getting OCD [1]. At present, it has been confirmed that the family context can have a tight relationship with the mental health condition [11], which means that this may be highly significant for the family to provide a positive atmosphere for children to prevent unhealthy emotions or further developments. If children are exposed to an environment that contains negative influences, such as having parents with OCD that would schedule dysfunctional patterns of actions for the child, is a force to be reckoned with. This will without a doubt have impacts on the child and increase the possibility of getting the disorder as his or her parents did [12].

3.2.3. Technology

The advance in technology has brought the use of electronic devices into many researchers' considerations. For instance, conditions such as addiction have also been linked to the exploration between itself and video games. A recent investigation came up with the idea of video games will affect OCD during childhood and puberty [4]. It has been proved that each additional hour of screen time is linked to a subsequent OCD diagnosis. Thus, time spent on video games and the tendency of having OCD are directly proportional. The reason why this is related is that long periods of time spent on electronic devices and exposure to internet information could result in more bias on self-perception, and hence can be further developed as obsessive thoughts and ideas [13].

4. Suggestions, Interventions and Diagnosis

4.1. Suggestions

4.1.1. Family Support

From above, it may be examined that the family can have a significant influence on the occurrence. To this end, a converted perspective is that domestic assistance will highly support the recovery of OCD [11]. The help from parents and other family members is essentially useful when they directly participate in the patient's compulsive rituals and modified their routines [12]. The attendance of the family will help the patient to succeed in their therapy. With the participation of the family and their efforts on relieving the child's anxiety, the rise in confidence as well as fate within the child can be seen and the distress would reduce with fewer impairments.

4.1.2. Social Assistance

In 2.3, the impacts of having OCD are discussed. What would be helpful for the government to alleviate citizens' burden on the condition, is to enhance the quality and quantity of social welfare, to be more specific, the health care, related assistance and the living environment. This might not only reduce the rate of incidence as citizens would find out the problem as soon as possible, improving the efficiency of curing, but may also release the burden on the patients and their families. That is, with the decrease in the expense of treatments, people who suffer from the disease will have fewer concerns about daily expenditures. More money could be used to improve their living, providing a more suitable environment for recovering, under the condition of the state helping to build a more comfortable living atmosphere.

4.2. Suggestions

People could be suffering from the mental health condition for a long time. Some of the patients would struggle to reach out for appropriate support for more than a decade, which could be a piece of solid evidence for severe disturbance of living of OCD. Under such situation, seeking help on time

is the right thing for people who has early symptoms to do. When basic assistance is insufficient, such as therapy and medications, need to be sought.

4.2.1. Cognitive Behavioral Therapy (CBT)

One well-known psychological therapy that is effective for OCD is Cognitive behavioral therapy (CBT) [14]. CBT is a conversation-based therapy that aims to alter the patient's thoughts and behaviors to avoid negative cognitions and improve personal coping measures. It mainly focuses on the current problems, rather than what happened in the past. It is well-accepted for a variety of mental health conditions. Under the situation of OCD, CBT will help by guiding individuals with OCD to deal with personal anxiety and distress. CBT could be a broad choice for the condition, which indicates that it would be suitable in many cases when considering diverse requirements, such as patients with younger or elder age, or with other diseases and mental issues. For instance, CBT used in transitional-aged youth for complex OCD has been proved to be efficient just as the normal symptoms, according to the experiment in 2022 [15]. Simultaneously, at present, CBT has developed a new form where the therapy is technology delivered instead of face-to-face conversation. This demolishes the barrier of distance and would benefit regions with fewer resources for mental treatments. Yet some may object that the efficiency would decline, it has been evidenced that there are no significant differences between the measures [16].

4.2.2. Exposure and Response Prevention (ERP)

The Exposure and response prevention, also name as ERP, as a leading professional therapy, is highly feasible for obsessive-compulsive disorder treatments. Current data state that the treatment gains of OCD are durable [3], as it may enhance the tolerance of impairment as well as compliance to treatments. ERP is useful in both the cognitive perspective as correcting dysfunctional beliefs and the behavioral perspective for assistance in demolishing the conditioned fear responses [17]. This is highly beneficial for patients as they will learn to confront their fear and meantime no longer rely on avoidance and safety actions. Notwithstanding, despite its considerable efficiency, ERP has time requirements cannot be disregarded. Even so, the public has committed to it because of the relatively high rate of recovery and other health benefits.

4.2.3. Selective Serotonin Reuptake Inhibitors (SSRIs)

Selective serotonin reuptake inhibitors are acknowledged as the leading medication treatment for OCD [1]. It can help reduce OCD symptoms by enhancing the level of serotonin inside one's brain. Serotonin is a chemical that could regulate functions such as emotions and mood. When relating to OCD, it could alleviate the symptoms for some individuals and makes them more responsive to psychological treatments. Therefore, the efficiency of SSRIs has been admitted and it would gain better results if accompanied by CBT or ERP. When individually comparing to CBT, only slight differences are between, since they both have requirements on time and similar effectiveness, but SSRIs appeared to be more cost-effective, thus would be a better option for lower economically conditioned families. Still, both SSRIs and CPT, are not always effective. They might fail to assist patients' recovery in 20-40% of the cases [6].

4.2.4. Choices & Combinations of Different Treatments

As above, it has been mentioned that SSRIs may be combined with CBT or ERP for the aim of a better outcome. Hence different choices and combinations may be chosen to achieve higher results

of treatments. In some circumstances, choosing individual methods would enlarge the efficiency of alleviating negative symptoms.

The integration of cognitive interventions (CT) techniques into ERP therapy [17] is an example of this. CT might add more influence on ERP and thus appear to be beneficial. Still, here need to be reminded that even though companionship between in recommended, the replacement of ERP by CT should be avoided. The outcome would present better when CT assists the process of ERP.

According to studies [14], as for the various needs of patients with OCD, diverse selections of methods will be used. For patients with moderate symptoms or who cannot stand low-intensity treatments, the combination of SSRIs, CBT, or ERP with mono-therapy could be chosen. On the other hand, for the young generation, CBT and ERP will have their preference in order to avoid the potential adverse effects of medication. When come to a further level, for the patients with higher severity or resistance, SSRI and CBT with ERP are recommended to reach the ideal effect.

5. Conclusions

OCD is a psychological condition that should promote the public's consciousness due to its gradual rate of growth. This article aims for giving knowledge from a broad perspective based on OCD and an analysis of it. The regarding criteria of the OCD have identified the mental health conditions with obsessive thinking and behaviour that are intrusive to the individuals' lives and will disturb ordinary academic or occupational functioning. The condition could result from a series of causes such as genetic influence or childhood experiences. Yet the root cause of OCD requires extra explorations and experiments to be determined.

Three of the most effective and common choices of treatments and interventions have been listed in the article, associated with the effectiveness of each. ERP and CBT are both effective therapies and are also very prominent in the treatment of OCD. Different combinations of treatments with the companionships of suggested actions would have distinct impacts on different target groups of people with obsessive-compulsive disorder. New methods or combinations of curing OCD might be further investigated in the future. However, what should not be ignored is that assistance from domestic and social perspectives will simultaneously have a positive influence and may promote the speed of recovery to some extent, so the help seek from family and societal support is relatively essential.

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