

Overcoming obsessive-compulsive disorder: Researcher pioneers treatment that tackles sufferers' fears and doubts

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Did I remember to lock the back door? Did I turn off the stove? Were the lights still on when I left the house this morning? Such minor doubts are part our daily mental chatter. But for the over 650,000 Canadians who suffer from obsessive compulsive disorder (OCD), thoughts along these lines can lead to compulsive checking — a potentially debilitating behaviour that keeps the sufferer locked in an endless cycle of fear and doubt.

For Concordia University's Adam Radomsky, a professor in the Department of Psychology and the Director of the Centre for Clinical Research in Health at Concordia, finding a viable treatment for these individuals is driving research freshly funded by the Canadian Institutes for Health Research (CIHR). Based on previous work conducted with colleagues at the University of British Columbia and the University of Reading in the United Kingdom, Radomsky is now testing a novel approach to treatment for compulsive checking that could just mean vast improvements in the quality of life of countless individuals.

"For years, the best way to treat compulsive checking in OCD sufferers has been through a difficult therapeutic process known as exposure and response prevention, or ERP" explains Radomsky. "By facing their worst fears repeatedly until their anxiety declines, patients learn to diffuse their hypervigilant checking responses — in theory." In practise, however, this type of treatment often results in patients quickly

discontinuing the therapy. "Refusal rates for ERP are unacceptably high, which is why we need to develop a new and refined treatment that specifically works for compulsive checking."

Radomsky's treatment builds on previous research which found that individuals with OCD who compulsively checked certain aspects of their surroundings did so because of an inflated sense of perceived responsibility. "If I don't turn off the stove, the house will burn down", is a plausible thought that can quickly devolve into an obsessive cycle of checking and re-checking, and can even result in an inability to leave the house. Yet, as proved by Radomsky's previous research, performing these seemingly senseless repetitions actually results in a loss of confidence.

By modifying the patient's inflated feelings of personal responsibility and reducing predictions of seriousness of anticipated misfortunes, the cycle can be turned the around. By placing the emphasis on how people think rather than on what they do, Radomsky's new approach targets people's faulty beliefs about how responsible they think they are, about their own memories, and about the dangers that they perceive. The progress of the proposed treatment takes the patient from exercises in normalizing inflated responsibility, through restoring confidence in memory, all the way to reducing self-doubt and guilt, hopefully leaving patients with new insights into how they perceive themselves, and the world around them.

Developed in the lab, Radomsky's research is set to show real promise in the field. "For me and my team," says Radomsky, "this work will capitalize on all of our previous experimental research and lead us to testing a new intervention based on our previous findings. It's our hope that this work will lead to a more substantial test of the [treatment](#), which in turn could influence how people treat OCD in Montreal, in Canada and beyond."

More information: The study paper was published in *Cognitive and Behavioral Practice*.

Provided by Concordia University

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