

# Adults with OCD can benefit from exposure therapy when common drug treatment options fail

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Patients with Obsessive-Compulsive Disorder (OCD) can improve their symptoms significantly by adding exposure and response prevention therapy to their treatment regimen when common drug treatment options have failed, according to new research from psychiatrists at the Perelman School of Medicine at the University of Pennsylvania. Exposure and response prevention therapy is a type of cognitive behavior therapy in which the patient is asked to confront triggers that give rise to their obsessions in order to refrain from performing the rituals in response to these obsessions. The study is published in the *Journal of Clinical Psychiatry*.

OCD is marked by the performing of "rituals" to decrease distress related to one's obsessions—such as excessive hand-washing to cope with a fixation on hand hygiene, for example.

"We know that exposure and response prevention therapy (EX/RP) can benefit these patients," said lead author, Carmen McLean, PhD, an assistant professor of [clinical psychology](#) in the department of Psychiatry at the Center for the Treatment and Study of Anxiety at Penn. "But this study showed that EX/RP is also effective for OCD sufferers who do not benefit sufficiently from common drug treatments for OCD."

A previous study compared the effects of adding risperidone, pill placebo, and up to 17 twice-weekly therapist-led sessions of EX/RP to

medication for OCD. "We found compared to patients who received medication or placebo, those who received EX/RP showed significantly more reductions in OCD symptoms and depression, as well as significantly more increases in insight, quality of life, and social function after only eight weeks," McLean said.

The current study included 32 patients who crossed over to receive 17 weeks of EX/RP treatment after not benefitting sufficiently from risperidone. Evaluation at 12 and 16 weeks showed significant symptom improvement, with 25 (78 percent) of patients completing treatment; 17 (53 percent) of them were classified as [treatment](#) responders and 11 (34 percent) classified as excellent responders at a 32-week follow-up evaluation. The remaining patients required medication changes during the follow-up period, which enabled them to shift to excellent-responder status.

This study adds to the large body of research that shows the benefits of [exposure therapy](#) for patients with OCD. "We want patients to know that there is another option, if common drug treatments have failed them," explained senior author, Edna Foa, PhD, professor of Clinical Psychology in the department of Psychiatry and director of the Center for the Treatment and Study of Anxiety at Penn and the creator of exposure therapy. "The therapy can be life-saving, if [patients](#) are aware of it."

Provided by University of Pennsylvania School of Medicine

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