

# EXTRA HELP FOR OCD

Recovering from obsessive compulsive-disorder (OCD) may include talking with a support group, family, friends, and a therapist and taking medication. Family members and friends who are willing to read information on OCD can be of great assistance by acting as ‘support persons.’ At every stage of recovery, they can offer important input or action:

- Help relabel repetitious thoughts and rituals as obsessions and compulsions. The best approach is to ask ‘Do you think that’s a ritual or realistic?’ It is more important to help people observe and ‘play with’ their obsessions than to tell them to stop—Sing their obsessive thoughts or perform their rituals for them as a ballet.
- Do not try to accommodate to OCD standards. Do what you think is reasonable in the way of cleanliness, orderliness, or safety and allow loved ones to do whatever else they need to do to satisfy themselves.
- If you are continually asked for reassurance, refuse to answer unless the person will write down what you are saying word-for-word —‘My husband states he is not mad at me.’ This applies to telephone calls for reassurance as well.
- Help explain brain chemistry that makes it hard for an ‘off button’ to block false thoughts from repeating. Reassure people that no matter how bizarre their thoughts and rituals seem, they are not crazy, immoral, weak, or hopeless.
- Offer information about family members who have experienced problems with OCD or related disorders to place the ‘blame’ on genetics.
- Help people rate the possibility of fears and concerns actually happening—Point out that a stray cat on the side of the road has about a 1% chance of becoming road kill.
- Help people refocus when they report they are obsessing or when they want to postpone rituals—Have them recite poems to you, ask silly trivia questions, play hand clapping games with children, or take calming breaths.
- Help create scenarios that exaggerate obsessions in vivid detail with humor. Read, sing, or dramatize scenarios with loved ones and help them rate the distress they feel after each performance.
- Offer to accompany people while they expose themselves to difficult situations. Help them tune in to sensations of anxiety and notice signs of calming—Touch the washing machines in a public laundry and remain there for 45–90 minutes until tension lessens.
- Help loved ones prevent rituals after they have exposed themselves to an OCD trigger—Threaten to join them in the shower if they bathe over 10 minutes.

## FRIENDLY CAUTIONS

Avoid asking for help from friends and relatives who are pushy, controlling, inept, disinterested, or rigid. Attempts to involve them in your recovery or make them change will only slow you down. Be cautious of bad advice. Input that makes you obsess even more is probably incorrect. Watch out for people who discourage recovery. They may be too helpful and offer to do things for or with you so you won’t have to ‘get upset.’ As you start to recover, they may become suspicious, jealous, accusatory, irritable, or even start to obsess themselves!

## NATIONAL NETWORKS AND SUPPORT GROUPS

If you are fortunate, you will be able to find one or two people who will give you appropriate assistance. However, this is not necessary. Many people do just fine on their own or working with a therapist. You may also be able to find a support group in your community. There are national networks, web sites, and books that offer additional assistance:

- Obsessive-compulsive information: Dean Foundation, [www.deancare.com](http://www.deancare.com), 8000 Excelsior Drive, Suite 302, Madison, WI 53717-1914.
- Our Courage Defines Us, International Newsletter for OCD: PO Box 9123, Niskayuna, NY 12309-0123.
- Anxiety Disorder Association of America, 6000 Executive Blvd., Suite 513, Rockville, MD 20852 (301-231-9350) has a newsletter and can provide information about therapists, research, and self-help groups.
- OC Foundation, Inc., [www.ocfoundation.org](http://www.ocfoundation.org), PO Box 70, Milford, CT 06460-0070, 203-878-5669.
- General Internet sites and links: [www.athealth.com/](http://www.athealth.com/), [www.cmhc.com](http://www.cmhc.com).
- *Brain Lock* by Jeffrey Schwartz (HarperCollins, 1996).
- *Stop Obsessing!* by Edna Foa and Reid Wilson (Bantam Books, 1991).
- *Tormenting Thoughts, Secret Rituals* by Ian Osborn (Pantheon, 1998).

## **MEDICATION**

Antidepressants such as Prozac, Zoloft, and Paxil increase serotonin levels in the brain and have been very effective in treating OCD. Luvox is similar to these medications and is more helpful in treating OCD than depression. The herb Saint-John's-wort helps in some cases. At times, medication completely relieves symptoms of OCD or makes them 'livable.' Often, behavior treatment is needed in addition to medication. It is especially important that women who plan to become pregnant at some time in their lives learn how to reduce or eliminate symptoms without medication. In mild to moderate cases of OCD when depression is not present, behavior strategies may be the treatment of choice. Behavior treatment can change brain chemistry but initially requires discipline and effort.

## **PROFESSIONAL HELP**

Therapists are especially helpful when using aggressive behavior therapy techniques of exposure and ritual prevention. First exposing yourself to OCD triggers through imagery can make actual contact with difficult objects and situations much easier. There are several treatment approaches that can make imagery practice less painful when first starting your recovery program. Therapists can also identify and treat any depression, panic disorder, or impulse control disorder that is contributing to your problems.