



Case Study on Obsessive Compulsive Disorder: (OCD)

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Abstract: This study aims to explore the clinical presentation, treatment efficacy, and management challenges of Obsessive-Compulsive Disorder (OCD) in a patient with predominant compulsions related to washing clothes and hands due to fear of contamination. One of the most widely recognized impulses seen in OCD is unnecessary hand washing, frequently determined by an extraordinary apprehension about pollution. This survey looks at the predominance, clinical highlights, hidden components, and treatment moves toward explicitly connected with impulsive hand washing in OCD. The pattern of fixations and impulses sustains tension and misery, prompting critical impedance in personal satisfaction. The case involves a 40-year-old lady diagnosed with OCD, focusing on her compulsive washing behaviours. Treatment approaches for impulsive hand washing in OCD commonly include a blend of pharmacotherapy and psychotherapy. Specific serotonin reuptake inhibitors (SSRIs), like fluoxetine and sertraline, are the first-line pharmacological treatment choices. Mental social treatment (CBT), especially openness and reaction counteraction (ERP), is viewed as the highest quality level psychotherapeutic medication for OCD and has exhibited viability in diminishing habitual hand washing ways of behaving.

Keywords: Obsessive Compulsive Disorder, Washing hands and clothes, Recurring thoughts, Cognitive Behaviour Therapy, Exposure Response Prevention, Repetitive behaviours, Medication, Pharmacotherapy, specific serotonin reuptake inhibitors (SSRIs).

Introduction: Obsessive Compulsive Disorder (OCD) is a mental health condition characterised by intrusive, unwanted thoughts (obsessions) and repetitive behaviours or rituals (compulsions) aimed at reducing anxiety or distress caused by those thoughts. It can significantly interfere with daily life and functioning. Among the different indications of OCD, habitual hand and garments washing address one of the most common and weakening side effect bunches. Essentially, enthusiastic washing of garments includes continued washing or cleaning of articles of clothing, frequently in light of silly feelings of trepidation of defilement or ruining. The pervasiveness of enthusiastic hand and garments washing in OCD changes, yet these side effects are every now and again revealed and can altogether debilitate a singular's personal satisfaction. Figuring out the clinical highlights, basic components, and treatment approaches for impulsive hand and garments washing in OCD is pivotal for medical services experts, specialists, and people impacted by the confusion. These acquaintance points will give an establishment to additional investigation and

conversation of this difficult part of OCD symptomatology. Obsessive Compulsive Disorder (OCD) varies in severity and can be managed with therapy, medication, or a combination of both.

Case History:

Demographical Data :

Name : ABC

Age : 40 yrs

Sex : Female

Marital status: Married

Education : Graduate

Occupation : Housewife

Address : Lucknow

Religion: Hindu

Socioeconomic Background: Middle Class

Informant Data: The client is a female aged 40 years with compulsive behaviour of washing clothes and hands. She was diagnosed with OCD by a psychiatrist. She has been on medication since 2020. The husband of the client said that she is obsessed with cleanliness and washing the already cleaned/ washed clothes and utensils. She doesn't touch anything that someone else touches (servant) . Keep washing hands all day and at times even bathes 2-3 times in a day.

Past Psychiatry/medical history: Diagnosed with sleeplessness, Major depressive disorder (MDD) and migraine in 2018 by a psychiatrist.

Family History: Used to live with father-in - law , Who passed away in 2020 since then the client is in a nuclear family with two kids and husband.

Personal and social History :

Perinatal History: Normal

Childhood History: Threatened and unable to speak her mind because of her strict mother , she lost her father in her childhood.

Education History : B.A.

Menstrual and Obstetric History: Normal deliveries of both children.

Sexual and Marital History: Happy with her husband and marital life . But sometimes she argues with her husband and fights with him about the family responsibilities. She becomes angry with her children when any complaints come from their school . She feels frustrated, annoyed and depressed sometimes.

Premorbid Personality (PMP) :

Interpersonal relationship: Normal

Predominant mood : Sad and self critical

Attitude towards self and others : Critical

Attitude towards work and responsibilities: Wants to take care of her family .

Prognosis and therapy sessions: In the session, the issue of washing clothes and utensils, washing hands and taking bath for 2-3 times in a day was dealt with. She has an intense fear of contamination, specifically focused on germs and dirt. She worries that if she or her belongings are not perfectly clean, she might contract serious illnesses or cause harm to others. People with gentle to direct side effects might have a superior visualisation contrasted with those with serious side effects that essentially debilitate day to day working. By and large, with proper treatment, backing, and the executives methodologies, numerous people with OCD washing impulses can encounter critical improvement in side effects and personal satisfaction. Notwithstanding, it's critical to perceive that OCD is a complicated problem, and individual reactions to treatment might change. Standard observing and change of treatment plans might be important to advance results and long haul anticipation. She was scolded by her mother at the age of 18 for cleaning the clothes properly. She never discussed this with anyone and over some time developed an aversion towards washing clothes and utensils properly. Her obsessive fears about germs and contamination lead to significant distress and are characterised by her compulsive washing behaviours, which impact her social, occupational, and physical well-being.

Discussion:

In our case, She experienced repetitive behaviour of washing clothes and hands. ERP can be challenging because it requires patients like her to confront their deepest fears without performing compulsions. The success of such treatments depends on the patient's commitment and the skill of the therapist in guiding the exposure exercises. While SSRIs are beneficial, the dosage and type of medication can vary widely among individuals. Discussion on her response to medication could provide deeper insights into managing side effects and optimising treatment efficacy. The role of support groups in providing a community and understanding can be crucial for emotional coping. Her involvement in a support group suggests a holistic approach to treatment where peer support plays a vital role. By repeatedly exposing oneself to triggers while resisting the urge to perform compulsions, individuals with OCD learn that their anxiety naturally decreases over time without needing to engage in compulsive behaviours. This process helps to waken the connection between obsessions and compulsions, leading to a reduction in OCD symptoms and improved quality of life.

● **How CBT help in OCD ?**

Cognitive Behaviour Therapy (CBT) is a common and effective treatment for OCD. It works by helping individuals change their patterns of thinking (cognitive) and behaviour (behavioural) related to their obsessions and compulsions. CBT helps people recognize and challenge silly convictions and mental contortions connected with their OCD side effects. By inspecting the proof for and against these convictions, people figure out how to foster more adjusted and practical viewpoints, decreasing the power of fixations and the need to perform enthusiastic customs. CBT outfits people with common sense abilities and survival techniques to deal with their OCD side effects. This might incorporate unwinding procedures, care reflection, and critical thinking abilities to address sets off and oversee nervousness all the more really. In CBT for OCD, a therapist helps the person:

1. Recognize and understand their obsessive thoughts.
2. Challenge and reframe irrational beliefs or interpretations that fuel the obsessions.
3. Develop healthier coping strategies to manage strategies to manage anxiety without storing compulsive behaviours.
4. Gradually confront feared situations or triggers, a process called exposure therapy, to reduce the anxiety associated with them.

Generally, CBT for OCD enables people to grasp their side effects, challenge maladaptive convictions, and foster successful procedures to oversee fixations and impulses. By focusing on both the mental and social parts of OCD, CBT offers an exhaustive way to deal with treatment that can prompt huge and enduring side effects .

- **How ERP help in OCD ?**

Exposure and response prevention (ERP) is a specific type of Cognitive Behavioural Therapy (CBT) widely used in treatment of Obsessive Compulsive Disorder (OCD) . ERP assists people with going up against their feelings of trepidation or fixations continuously while learning better ways of adapting to nervousness without falling back on enthusiastic ways of behaving. It urges openness to dreaded circumstances or articles while forestalling the impulsive reaction, which desensitises the person to their triggers and decreases uneasiness over the long run. On account of OCD connected with washing hands and garments, ERP would include steadily presenting the person to circumstances that trigger their enthusiastic washing ways of behaving. For instance, the specialist could begin by requesting that the individual touch something somewhat grimy and fight the temptation to quickly wash. After some time, the openness would increment in force, for example, contacting something saw as exceptionally messy, while the individual figures out how to exorbitantly endure the uneasiness without washing. This interaction assists them with understanding that their apprehensions about tainting are overstated and that they can deal with their nervousness without depending on urgent washing. ERP involves deliberately exposing oneself to the thoughts, images, objects, or situations that trigger obsessions (exposure) while refraining from engaging in compulsive behaviour (response prevention) .

1. **Exposure:** Individuals Confront the situations or stimuli that trigger their obsessions, gradually and systematically facing their fear in a controlled environment.
2. **Response Prevention:** During exposure, individuals intentionally refrain from engaging in compulsive behaviours or rituals that they would typically use to alleviate anxiety or distress.

- **How Pharmacotherapy with SSRIs helps in OCD?**

Pharmacotherapy for OCD ordinarily includes particular serotonin reuptake inhibitors (SSRIs) as first-line treatment. These incorporate meds like fluoxetine, fluvoxamine, sertraline, and others. In situations where SSRIs aren't compelling, serotonin-norepinephrine reuptake inhibitors (SNRIs) or tricyclic antidepressants might be thought of. Furthermore, antipsychotic prescriptions like risperidone or aripiprazole are now and again utilised as expanding specialists for the individuals who don't answer SSRIs alone. Treatment plans ought to constantly be custom fitted to individual necessities and may include a blend of meds and treatment. Pharmacotherapy with SSRIs can help in OCD connected with handwashing and garments by focusing on the basic neurochemical uneven characters that add to the issue. In particular, SSRIs increment serotonin levels in the cerebrum, which can assist with managing mind-set and nervousness. On account of OCD, this can lessen the seriousness and recurrence of fanatical considerations and urgent ways of behaving, for example, unnecessary handwashing or garments washing. While SSRIs may not take out these ways of behaving completely, they can essentially diminish their power and permit people to more readily participate in treatment, like ERP, to pick up survival techniques and progressively decline their impulses.

Conclusion:

Behavioural addiction is developing as a grave issue among young adults and can emerge as a compulsive behavioural problem in the later stage of life as seen in the case study presented in the paper. Therapists dealing with clients of behavioural addictions must write case studies for a better understanding of the area. A comparison between the two case studies presented in the chapter shows the impact of the problem starting from what seems to be general miscommunication between two people (child and mother in this case) impacted the social setup, educational setup as well as the maintenance of daily routine of the client. Her case is a clear illustration of how pervasive and debilitating OCD can be when centred around contamination fears and washing compulsions. Her journey underscores the importance of a comprehensive treatment plan that includes therapy, medication, and support systems. Through ongoing management and support, individuals with OCD can lead more functional and fulfilling lives, though challenges in treatment adherence and efficacy can persist. Engaging in discussions like these enhances understanding and can lead to more effective interventions for OCD patients.

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