

Obsessive Compulsive Disorder

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Introduction

Obsessive-compulsive disorder can be alarming and can cause a disturbance in individuals' daily lives. There are many people who suffer from obsessive-compulsive disorder regardless of their race, gender or culture. Adults, children, and teens could possibly gain OCD due to stressful circumstances that happen in their lifetime. People who feel the pain of obsessive-compulsive disorder frequently have overwhelming thoughts of anxiety and worry that lead to behaviour and actions that turn into repetitive habits. The action usually takes place when people meditate that the most horrible things might occur to them. OCD is actually an anxiety-related disorder. Obsession refers to recurrent, undesirable and distressing thoughts that an individual cannot end. These unwanted thoughts are incapable of being blocked and can cause severe distress. Moreover, compulsions are obtained as a result of obsession. These are ritualized and repetitive actions that are performed to relieve the anxiety triggered by the obsession. There are numerous obsessions that people suffer, including fear of causing damage to another person, fear of uncleanness, fear of acting in a generally unacceptable way, the anxiety of making an error and too much doubt. As a result, many people perform compulsions such as washing, cleaning, organizing, arranging, repeating, and collecting. Therefore, some individuals with OCD perform some rituals that assist in letting go of the anxiety, though that assistance is only momentary.

Discussion

It is thought that OCD has a neurobiological origin, and the brains of people with this disorder function in a different way. OCD, which happens in infancy, is more known in boys than in girls. There is a combination of neurological, cognitive, behavioural, genetic and environmental factors that might prompt the conditions of obsessive compulsion disorder. It might be possible that signs of OCD are sober to be inherited in families. It is a hereditary disease, and patients may get indications of OCD through it. It is also termed as a familial disorder that runs in relatives. Sometimes, people associate certain situations and things with fear. People may feel anxiety by linking certain situations with fear. They learn to escape from these objects or learn to execute specific rituals to help diminish the fear.

This avoidance and fear may start at a time of intense stress. Generally, people stop tolerating or confronting fear when the link between the feeling of anxiety and the object becomes recognized. As a result, individuals with OCD start to avoid the thing as well as the anxiety it creates. People stop thinking about an object when they recognize the connection between a thing and a feeling of anxiety. Moreover, it is the behavioural theory that emphasizes how an individual with OCD makes a

link between fear and things.

On the other hand, cognitive theory emphasizes how an individual with OCD misapprehends their thoughts and judgments. People actually misinterpret their feelings and thoughts in different ways. In addition, most people avoid intrusive thoughts, but for people with OCD, the worth of these disturbing thoughts is overstated. A Most individual can disregard and shrug off the disturbing feelings, but an individual with OCD may overstress the value of thought and consider it a threat. People who suffer from OCD may have disparities in brain substances glutamate and serotonin (De Silva, 2014). It might be possible that the conditions of OCD within an individual may be triggered due to environmental stressors. Studies show that an individual with OCD commonly reports stressful life events before the sickness begins (De Silva, 2014). As well as, If OCD is left untreated, then it changes into a chronic condition.

Furthermore, it is essential to determine all these dark and disturbing thoughts. Sometimes, people try to get relief from anxiety by getting the opinion of family and their friends. In this condition, people may frequently request a friend to repeat the previous incident. People may say again and again to their fellows to restate the past story. At a certain time, a person with OCD is recognized to fanatically cut apart their relationship with coworkers, family members, romantic partnerships, and friends. People may assume for a moment that they are advancing to touch their workmate. These are just violent and undesirable thoughts about inappropriate sexual activities that people frequently suffer from with OCD. An individual with OCD may assume unwanted thoughts about inappropriate sexual activities. Most people have disturbing thoughts and feelings about the likelihood of being affected by misfortunes or other violence. Studies show when people attempt more to avoid disturbing thoughts, then it will pop out into the heads of people. The more people think to dodge distressing thoughts, the more this thinking will remain in their heads.

Additionally, people who suffer from OCD may think of themselves as unattractive or abnormal. In this condition, people consider their skin, hair or noses not good-looking. Most people with this disorder feel anxiety about the hygiene of their bodies. Furthermore, people feel distressed about getting dirty from germs. In this situation, people wash their hands compulsively to ease their infection fear. People will take showers many times to clean their bodies in order to satisfy themselves. In this condition, he is not satisfied easily regardless of the recurrent showers. There are other factors that can increase the danger of triggering or developing the obsessive-compulsive condition. Sometimes, people feel embarrassed and ashamed about the disorder of OCD. An individual with OCD feels humiliated due to repetitive behaviour. On the other hand, people can get rid of this disorder through proper treatment.

If the individual has parents or other family members with OCD, then it can amplify the risk of the disorder. If a person has experienced stressful or traumatic events, then the risk of OCD will deepen. There is also a possibility of relatedness of OCD with other psychological health conditions, for instance, depression, anxiety disorder or substance abuse (De Silva, 2014). On the other hand, the patient may face various problems with this disorder. The patient will not be able to attend school,

work or other social activities. Due to OCD, the patient may develop suicidal behaviours or thoughts. It might be likely people may try to make an attempt at suicide due to fear of different things. Other than that, there is no proper method which a person can adopt to prevent this disorder. It will be effective to get a proper and appropriate treatment as soon as possible. Additionally, proper treatment may assist in preventing this disorder from disrupting and worsening daily activities. There is a cognitive-behavioural therapy that is used for the treatment of obsessive-compulsive disorder to alter the thoughts and behaviour of a person. The therapist conducts cognitive therapy and exposure and response prevention therapy for this purpose.

The majority of CBT treatments are performed at the office of a therapist once a week. In addition, the therapist recommends different exercises to the patient at home in the middle of sessions. In order to cure the patient of obsessive-compulsive disorder, the psychotherapist conducts the session with various exercises to practice. The patient might need more recurrent and frequent sessions due to having severe OCD. It is important to search for mental health specialists who are trained and qualified in ERP therapy. A well-trained specialist will be a person who encourages the patient to be involved in exposure exercises throughout the sessions. The specialist will encourage and support the patient in engaging in practical activities. It will be helpful for the patient to be involved and engage in more interaction outside the office. In this way, the patient will be able to interface with the actual environment. The purpose of conducting this therapy is to interpret exposure to the actual domain where a person can repel as well as fight back compulsions.

Conclusion

It is concluded from this whole discussion that OCD is nothing more than having disturbing and unwanted thoughts. These are the obsessions and images that interfere with the minds of children and teens. These feelings cause anxiety and discomfort that may compel a person to show awkward behaviour. These are the thoughts that occur at an early age. This problem is more common in teenage boys. However, in adult women, this occurs more often than in men. Also, the symptoms of this can transform over time. This is more common a washing compulsion at first and then it changes into checking compulsions. This problem occurs in about 2 to 3 percent of people in their life. All these things show that this problem can change with age, and people show different side effects at different age groups. As a child grows, his concerns change to more adult needs, such as moral, religious and sexual concerns. The feeling of fitting in and being normal in society is more common in adults, so the person having OCD keeps it secret from others. This is done to prevent embarrassment and shame. This happens because of strange behaviour and thoughts. This can be reduced by talking about these issues with an adult and seeking help.

References

De Silva, P. (2014). Obsessive-compulsive disorder. In *Adult Psychological Problems* (pp. 143-162).



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