

# Obsessive-compulsive (OCD) and related disorders

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#### Rationale

OCD is characterized by the presence of obsessions and/or compulsions. OCD and other disorders with similar manifestations (body dysmorphic disorder, hoarding, trichotillomania, etc.) are a significant source of morbidity and impaired quality of life. OCD is frequently comorbid with other disorders (see causal conditions).

#### **Causal Conditions**

(list not exhaustive)

- Adverse childhood experiences (e.g., abuse, behavioural inhibition)
- Genetic neurological dysfunction
- Other psychiatric disorders (e.g., tic disorder, anxiety disorders, depression, substance use disorder)
- Other medical conditions (e.g., infections)

## **Key Objectives**

Given a patient with obsessions and/or compulsive behaviour, the candidate will diagnose the condition, along with its severity and possible complications. Particular attention should be paid to possible etiology and coexisting conditions.

### **Enabling Objectives**

Given an individual with an obsessive and/or compulsive behaviour

- List and interpret critical clinical findings, including those derived from
  - a. a thorough history aimed at estimating the severity of the disorder and other comorbid or etiologic factors;

- b. a physical examination aimed at ruling out physical complications (e.g., dermatologic);
- List and interpret critical investigations, including where appropriate
  - a. drug screening;
  - b. neurological imaging;
  - c. infectious agents;
- Construct an effective management plan, including
  - a. determining whether pharmacological intervention (e.g., SSRI medication) is indicated in this case;
  - b. referring for specialized care (e.g., psychological services, family counselling), if required;
  - c. anticipating potential psychosocial impact.