Obsessive-Compulsive Disorder (OCD) 101 Guide

What is OCD?

O **Obsessive:** Recurrent intrusive and unwanted thoughts, urges, or images that cause distress, which we try to ignore, suppress, or neutralize with other thoughts or actions.

C **Compulsive:** Repetitive behaviors (e.g., washing) or mental acts (e.g., counting) in response to an obsession or according to rigid rules, to reduce distress or prevent a dreaded event.

D **Disorder:** These experiences cause significant impairment, distress, consumes time (> 1 hr/day), and/or interferes with daily life.



Note:
While the DSM-5-TR does not classify subtypes of OCD for diagnosis, they can be helpful for tailoring treatment. Common subtypes include checking, contamination, harm, scrupulosity, order/symmetry, and "Pure O," with mental rituals acting as compulsions. People can experience one or multiple subtypes, and themes can change over time.

Exposure and Response Prevention (ERP) Therapy

ERP is the gold-standard treatment for OCD through what psychologists call ***inhibitory learning***. Exposure involves facing the fears or discomfort tied to obsessions. Response Prevention involves not engaging in the compulsions that will naturally follow. Through this, we start to learn that the feared outcome is unlikely to occur in the absence of compulsions, and we can tolerate the distress more than we once thought. This learning eventually helps us go back to living a larger life with less avoidance.

Keep in Mind

Your clinician will work with you to create an exposure hierarchy—it is like a ladder tailored for you toward exposures that more closely embody the feared outcome. This is done safely and at your individual pace.

What OCD is NOT

"You are so OCD!"

Everyday talk often uses "OCD" to describe someone as being rigid with neatness and order, overly picky, a "control freak," perfectionistic, and getting stuck in the details. These are personality features instead of the distress of OCD. Psychologists describe them as **ego-syntonic**, meaning that they are not disturbing to the person.

OCD symptoms are **ego-dystonic**, causing emotional distress and interfering with a person's life.

Misrepresentations of OCD



Movies and shows often overdramatize characters with OCD for dramatic or comedic effects. While entertaining, they often trivialize or ridicule OCD symptoms as being odd, quirky, or worse, psychopathically violent. Individuals with OCD may feel misunderstood and shamed by some of these representations, making it harder to reach out to others and seek treatment.

What media characters get OCD right?

- **Sheldon Cooper, *Big Bang Theory*** – Sheldon's rigid habits (e.g., triple-knock) serve as punchlines and do not bother him as distressing compulsions would.
- **Melvin Udall, *As Good As It Gets*** – Grumpy and hard-to-get-along-with novelist, Melvin, gets "cured" by love in this romantic comedy. Falling in love does not cure OCD.
- **Cooper, *Trap*** – Cooper is a serial killer with apparent OCD symptoms. There is no evidence linking OCD to violent criminal behavior.
- **Howard Hughes, *The Aviator*** – Hughes' intrusive obsessions and washing rituals are accurately portrayed with the progression of the disorder.
- **Aza Holmes, *Turtles All the Way Down*** – Aza's experience is taken seriously as severe contamination fears and debilitating thought spirals without superficial comedic or dramatic spin.

We Are Here For You

The Perfect Therapy Group offers OCD assessment and ERP treatment.

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