

# A study of traumatic life events in link with obsessive- compulsive disorder

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Running head: Effect of Traumatic Life Events on OCD A Study of Traumatic Life Events in Link with Obsessive-Compulsive Disorder A Study of Traumatic Life Events in Link with Obsessive-Compulsive Disorder

Obsessive-compulsive disorder, OCD, as defined by the National Institute of Mental Health is an anxiety disorder that is distinguished by persistent, unwanted thoughts and/or compulsions (“NIMH,” 2007). OCD is one of the most expensive and persistent forms of psychopathology. Although OCD has been thought of as a fairly rare disorder, recent studies have found that 1. – 4% of the population has some form of OCD. While the understanding of this disease has been expanded over the past few decades there still remains much to be learned about the causes and origin of the disease. One factor that is thought to contribute to the onset or intensification of most psychiatric disorders is stressful life events especially traumatic life events (Cromer, Schmidt, & Murphy, 2006, p. 2). However there has not been significant research on the relationship of stressful life events or traumatic life events with OCD.

This study attempts to examine the potential correlations between traumatic life events and OCD, if any at all are present (Cromer, et al. , 2006, p. 3-4).

Method A total of 265 participants, being at least eighteen years of age, all with some degree of OCD as their primary disease, participated in this study. Patients with schizophrenia, severe mental retardation, or currently depressed individuals were excluded from this study. The participants were interviewed and tested using four different methods.

These methods included the Structured Clinical Interview with the Diagnostic and Statistical Manual of Mental Disorders (SCID), the Yale-  
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Brown Excessive Compulsive scale (Y-BOCS), a traumatic life event measure, and the Beck Depression Inventory (BDI). The SCID interview was carried out by a trained, as well as experienced, interviewer. Two independent doctors then reviewed the results before making their final blind diagnosis. The Y-BOCS measured how severe each participant's OCD symptoms were in each of the four areas. These areas incorporated hoarding, ordering/symmetry, checking/obsessions, and cleaning/contamination (Cromer, et al. , 2006, p. 4). The traumatic life event measure was in an interview-like setting, where the participants were given descriptions of various traumatic life events. After each description the participants were asked various questions about their own experiences with similar events. If the participant was still troubled by any of the events the interviewer would continue with a posttraumatic stress disorder test, regardless if the participant met the qualifications for posttraumatic stress disorder.

This was done in order to make sure that all traumatic life events were documented properly. The final test was the Beck Depression Inventory which, through a full set of twenty-one questions, determines whether or not a person is currently depressed and the severity of their depression (Cromer, et al. , 2006, p. 5). Results Out of the 265 patients who participated in this study, 143 of them (roughly 54%) had experienced at least one traumatic life event at the time of the study (Cromer, et al. 2006, p. 1). If more than one event encountered, the participant suffered an increase in the severity of their OCD symptoms. These results remained consistent even when crucial variables, such as age, presence of depression, and the age OCD first began were controlled. Of the four symptoms of OCD that were tested for

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ordering/symmetry and checking/obsessions were found to have the closest correlation with the presence of traumatic life events (Cromer, et al. , 2006, p. 5). Discussion

The results of this study largely support the fact that the symptoms of OCD are intensified by the onset of traumatic life events (Cromer, et al. , 2006, p. 1). However the researchers believe that there still needs to be testing done to clarify the link between OCD and traumatic life events as there may be confounding variables creating false positives. For example, there is a chance that some of the symptoms (ordering/symmetry and checking/obsessions in particular) are linked to other mood and anxiety disorders which could be the cause of the higher correlation in the study (Cromer, et al. 2006, p. 9). To improve on this there would have to be a study done to observe how those symptoms react with other disorders. The traumatic life event data that was collected was based off what the patients could remember from the past. This suggests that this particular data is not entirely accurate. The strength in their research, however, is how the SCID test was performed. Not only were there professional interviewers, their work was double checked by two independent doctors to insure the utmost accuracy.

The participants were tested and interviewed in four different ways to accumulate more data to create a more accurate experiment (Cromer, et al. , 2006, p. 4). There is something that the researchers mention that I do not entirely agree with however. Cromer, et al. , says that someone with OCD would be more sensitive to traumatic life events and this would skew

the results (2006, p. 10), but it is to my understanding that a traumatic event needs only to be traumatic to the person it is happening to, no matter how another observer may be affected by the same situation.

If the event is traumatic to the person they will respond to the event (both mentally and physically) just as another person without OCD would respond to an event that is traumatic to them. References Cromer, K. R. , Schmidt, N. B. , & Murphy, D. L. (2006) An investigation of traumatic life events and obsessive-compulsive disorder. Behavior Research and Therapy 45(7). Retrieved September 23, 2007, from ScienceDirect database. (September 28, 2007). NIMH · Obsessive-Compulsive Disorder (OCD). Retrieved October 03, 2007, from <http://www.nimh.nih.gov/health/topics/obsessive-compulsive-disorder-ocd/index.shtml>.