



Psychosocial Response Group

Coping with the Coronavirus

Obsessional problems & obsessive compulsive disorder (OCD)

Introduction

This leaflet is one of a series about coronavirus and mental health. The leaflets contain information about how the coronavirus outbreak might affect your mental health, how to look after yourself, what to do if a problem persists, and where to find further information.

Coronavirus key facts:

- this is a widespread outbreak, not limited to one area
- it can occur at any time rather than being concentrated in wintertime; unlike the influenza virus, the coronavirus is not seasonal.
- for some people who are older or have pre-existing physical health conditions (such as diabetes, lung conditions, heart disease, severe asthma) it is more likely to be severe, and may even be fatal, whereas for the majority of others it may be a relatively mild condition.

Whilst all of us are familiar with challenges in life, the coronavirus and its consequences are a particularly difficult and stressful experience for everyone. Some people may have to cope with being unwell, looking after family members or dealing with loss and bereavement. Coming to terms with the consequences of coronavirus for you and those close to you can take some time.

This leaflet focuses on coping with obsessional problems in general and obsessive compulsive disorder (OCD) specifically. Other leaflets in the series cover worry and uncertainty, bereavement, recovering from trauma, and coping with depression.

What are Obsessional Problems and OCD?

Almost everyone is finding coronavirus and the lockdown

measures particularly stressful and disturbing. Those with preexisting mental health problems will typically find these worsen, and some people will understandably experience high levels of distress which were not an issue for them previously.

OCD is one of the problems which may worsened in the current circumstances, and some people may find they develop this problem for the first time.

OCD is a persistent and often disabling problem in which people experience intrusive thoughts, images, impulses or doubts as a sign they might be responsible for causing or preventing harm to themselves or other people.

These thoughts are seen as warnings about threats in the person's environment or their own minds or bodies, and lead to attempts to avoid or 'neutralise' such threats. This tends to involve behaviours such as checking (trying to make sure things are safe), washing (to get rid of the danger), excessive reassurance seeking from information sources and other people, and avoidance (removing themselves from any and all risks).

All obsessional problems and OCD begin as worries which could be regarded as reasonable from the perspective of the person experiencing them. However, sometimes these worries go too far and interfere with, or even take over the person's life, which is when obsessional worries become a 'disorder'.

Being fearful of coronavirus and its consequences for yourself and other people is, therefore, perfectly normal and understandable until it takes people past the protective measures advised by the government to a place where it paralyses them in terms of their daily activities, their happiness and the happiness of loved ones.

If that is happening for you, then this leaflet may be of some help. If you know that OCD is or has been a problem for you before the coronavirus, this leaflet may help you if your OCD is worse at this time. For other people, you may find that similar issues are now becoming a problem for you.

How can I tell if I have OCD?

Obsessions, compulsions and avoidance

Most people experience intrusive, unpleasant and sometimes unacceptable thoughts, images, impulses or doubts.

Here are some examples of thoughts or **obsessions** that are known to occur throughout the population. These are just a few examples, there are many, many more which people commonly experience. Note that typically they concern things which are unacceptable to you.

Thoughts:

- I'm contaminated
- I might pass on contamination to other people or cause others to become ill or die
- I might have done things wrong
- the door is not locked
- I'll be unlucky as it's Friday 13th
- I might abuse a vulnerable person or child
- that is contaminated with germs

Urges:

- to touch something in a particular way or I won't feel right
- to jump in front of a train
- to assault someone
- to spit at someone
- to touch someone inappropriately

Images:

• a family member dying in hospital

- awful things happening to those you love
- people you love being ill or dying
- harming a baby or child

Doubts:

- have I left the hair straighteners plugged in and set the house on fire?
- did I lock the door?
- did I run someone over without realising it?
- did I touch something dirty?
- did I wash my hands properly?
- am I sure that I have done all that I can to make myself and others safe?

It is very important to realise that these intrusions occur in everyone, not just people with OCD.

Although obsessional intrusions tend to be upsetting, especially if they are taken as signs of danger, they are just thoughts and odd ideas which just pop into your mind. They are the brain equivalent of junk mail and something we all experience at different times.

The bigger problems tend to come if we then try to do things to stop these obsessions, or make sure that the things they concern don't happen. That might mean **avoidance** of places, people or activities which trigger obsessions. It might mean feeling that you must do things – **compulsions** – that you think might reduce the likelihood of being you responsible for harm.

What is particularly problematic is when people try to be 100 per cent certain they have prevented harm. However hard they try, there will always be doubt. To make matters worse, the harder we try to be certain, the less confident and more anxious we become. The solution becomes the problem. Handwashing becomes all consuming because trying to get reassurance just increases your doubts and gives you more things to be frightened of or uncertain about. This typically leaves you feeling more reliant on others and less confident in your ability to cope. Unfortunately, we know that its the compulsions that lead to OCD persisting and becoming a serious problem.

Responding to thoughts, urges, images and doubts in a compulsive, excessive way can take several forms including, active compulsions, heightened levels of avoidance or requiring others to respond in a certain way. Examples of each of these are as follows:

Examples of compulsions:

- 'neutralising' e.g. praying to try to 'cancel out' a bad thought about someone dying from the Coronavirus
- washing to eliminate a feeling of contamination
- repeated checking of body temperature of yourself or others
- spending hours a day on the internet for information to try to get the latest information about transmission or any new information about minor symptoms
- asking others for reassurance about, for example, symptoms, cleanliness
- rumination going over and over what you have touched or who you have seen and trying to work out whether there is any possibility of transmission

Examples of 'hidden' compulsions and avoidance:

- trying not to think about worrying things
- your attention being drawn to 'bad things'; looking for trouble, feeling on 'high alert' for things linked to your worries

Examples of avoidance:

- not leaving the house at all despite being able to do so under the government guidelines
- avoiding the news to avoid triggering disturbing images
- avoiding the news or other information about the

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coronavirus as thinking about it might make it more likely to happen, or give you 'bad luck'

- not going past homes of people in 'high risk' groups in case you sneeze or cough by their door
- involving others
- requiring others to:
 - wash their hands in a routinised way before completing tasks
 - repeat phrases in certain ways
 - check that the house is secure
 - clean items, clothes, bedding beyond the amount they would ordinarily consider acceptable
 - buy particular products such as antibacterial cleaners
 - not leave the house or see certain people
 - follow de-contamination routines after leaving the house/ before preparing food or having any form of contact

Emotions or feelings linked to OCD

- feeling worried, anxious or fearful most of the time, especially in situations which trigger intrusive thoughts, images impulses and doubts.
- feeling generally uncomfortable
- being more angry or miserable/sad than usual.
- feeling disgusted by things or people around you

What are the actual risks and how can I reduce them?

Make sure you get accurate information from reliable sources:

- <u>www.nhs.uk/conditions/coronavirus-covid-19/</u>
- <u>www.gov.uk/coronavirus</u>

Some media or internet sources may exaggerate the dangers.

Estimates suggest that many people will have a mild form of the illness and will not even require hospital treatment.

Those that are older or have an existing long-term condition may be more at risk of developing a more severe illness. Most of those who get ill will recover. For the vast majority of us the coronavirus is likely to be a temporary illness.

See the 'further information' sections below.

Isn't this just a normal response to the coronavirus threat? How to tell if this could be OCD and what to do about it?

Most people are worried or concerned in these unprecedented circumstances when we are being instructed to stay at home, observe social isolation or social distancing, and to wash our hands in a specific way. The threat is real, and the behaviours we should use to reduce the risk to ourselves and others are clearly specified. That is not OCD.

If you find you have routinely gone beyond the recommendations, and that thoughts and behaviours related to coronavirus begin to dominate your life, it may be you have developed OCD. Twenty seconds washing with soap or hand sanitiser after coming into contact with the outside world is recommended. Several minutes washing, using disinfectant and doing it when you have come into contact with anything you are not sure about - this is the transformation from being careful, into OCD.

The signs of emerging OCD are when the things you are doing to try to be completely safe actually become problematic - **the solution becomes the problem**. For example:

	How this 'solution' becomes a problem.	What to try to do instead.
Washing in response to a doubt (e.g. 'are my hands actually clean?')	OCD feeds on doubt – the more you react to a doubt, more doubts occur.	Wash hands according to the government guidelines.
Avoiding touching items in your own home.	The more you avoid, the more you will want to avoid.	Touch items in your own home as you usually would or as others in your home are doing.
Washing after touching any object.	The urge to wash will increase and you will never be able to satisfy yourself that it is enough.	Wash your hands according to the government guidelines.
Trying to feel completely certain that your hands are clean.	Complete certainty is an impossibility. You will lose confidence in your judgment.	Wash your hands according to the government guidelines. First impressions are better and more accurate. Tolerate or accept the feeling of Uncertainty.

Trying to wash your hands 'perfectly'.	You will never reach perfection and trying to do so will result in ever increasing fear and feelings of guilt and responsibility.	Follow the government guidelines. Remind yourself that the guidelines state 20 seconds, not 'to the point of perfection'.
Use strong chemicals to clean your hands or other parts of your body.	To 'feel' clean the next time, you will want to use these chemicals again, which will cause you harm.	Wash your hands according to the government guidelines. Remind yourself that if we needed strong chemicals to eliminate the coronavirus, this would be in the recommendations. They are not needed.
Looking for possible coronavirus contaminants in your own home.	The harder you are 'looking for trouble', the more you will believe you have found trouble, and the more frightened you will feel.	Follow the government guidelines.

Seeking reassurance from others to try to feel certain about e.g. a symptom or an aspect of the transmission of the virus.	Repeated requests for reassurance increases the feel- ing of doubt, uncertainty and anxiety.	Share your fears with others rather than asking for reassurance e.g. rather than saying 'can the virus be transmitted via?', tell your friend or loved one that 'l'm feeling so anxious about everything and I need a bit of comfort, distraction or solidarity'.
Repeated checking of the internet.	Repeated searching for information increases the feeling of doubt, uncertainty and anxiety.	Set specific times of day and lengths of time to look at the internet and chose the sources of information carefully.
Trying to work out how 'chains' of contamination might be spreading the coronavirus around your environment.	The more you focus on this, the more you will find to worry about.	Tolerate or accept some uncertainty about the nature and spread of the virus. There are teams of scientists around the world working on this. It is not up to you to work it out.

How can I reduce obsessional problems?

Recognise unhelpful worrying and behaviour

If you are doing the appropriate amount to reduce the risks then further effort is pointless and unhelpful. The harder you try to make yourself sure you are not contaminated and are safe, the less certain you will become. It is like digging to get out of a hole. OCD is the hole, and compulsions and avoidance is the digging. No one ever felt better about their obsessional fears by doing compulsions, and the more you do, the more you will worry. And that is before you consider how much the compulsions are interfering with your life. Again, we would remind you that the solution becomes the problem with obsessional fears.

Accepting uncertainty

One of the most important sources of obsessional worrying is aiming for complete certainty. This just not possible to achieve. Of course we would all like someone to convince us that we or our loved ones will be 100 per cent safe. The reality is that no-one can do that, either about the coronavirus or about many other worries.

Try to remember that you, and everyone else, actually lives with uncertainty all the time, because we have no choice. Every time we cross the road, start a new relationship, or move house, we cannot be certain about what will happen. We cope anyway. In fact we can almost never be certain, either about good events or bad events.

Tomorrow, you might win the lottery or a meteor could crash down on your house. Even such extreme events are not completely impossible. They are just very unlikely. The fact that many things in life are uncertain does not mean they are probable – you might win the lottery, but it would not be wise to assume that you will. Similarly, the risks from the coronavirus are not zero, but nevertheless it is likely that most people will be okay.

If I'm trying to break free from OCD, then what else can I do?

As far as possible, engage with activities which you can do under coronavirus restrictions. These could include:

- being in touch with friends and family, though video conferencing or the telephone. Physical distance does not have to mean socially distant
- sharing some mealtimes online.
- sharing online games or pub quizzes
- watch films or streamed performances
- listen to music
- go outdoors within the limits set by the current rules.
- plan what you are going to do when you are free to do so. Plan in detail a post-lockdown holiday, a shopping trip, a visit to friends or family?
- do anything that you find relaxing relaxation itself will not help you to get rid of OCD but the opportunity to unwind is helpful and may help with sleep.
- be kind to yourself this is an exceptionally difficult time for everyone, and you may find it harder than most. If you have a bad day today, you can still have a better day tomorrow.

For many people, the abrupt and at times brutal changes in routine can be really upsetting. Try to develop new routines like setting a wake up time, taking your daily exercise, eating with friends or family online and so on. This will help ground you in what is clearly an abnormal situation.

When should you seek professional help?

If you find that fear of contamination leads you to want to throw away perfectly good food. At its worst, this can lead to you running out of food or having a seriously restricted diet and you should contact your GP for help.

For information about coronavirus:

- <u>www.nhs.uk</u>
- <u>https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/</u>
- Keep up to date via television or radio, once or maybe twice each day.

This leaflet was produced by the Oxford Health NHS Foundation Trust Specialist Psychological Interventions Centre. Many thanks to service users from the OCD charities for some helpful comments and feedback.

Your notes

Please contact us if you would like the information in another language or different format.

Arabic یُرجی الاتصال بنا إذا کنتم تر غبون في الحصول علی المعلومات بلغة أخری أو بنتسیق مختلف. আপনি এই তথ্য অন্য ভাষায় বা আলাদা আকারে Bengali আপনি এই তথ্য অন্য বা আমাদের সাথে যোগাযোগ করুন। اگر آپ یہ معلومات دیگر زبان یا مختلف فار میٹ میں چاہتے ہیں تو برائے مہربانی ہم سے رابطہ کریں۔

Chinese 若要以其他語言或格式提供這些資訊,

請與我們聯繫

Polish Aby uzyskać informacje w innym języku lub w innym

formacie, skontaktuj się z name.

Portuguese Queira contactar-nos se pretender as informações

noutro idioma ou num formato diferente.

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