

The Obsessive Compulsive disorder is a neurotic disorder. But they are combined together & made O.C. disorder. Obsession refers to recurring ideas & when these are accompanied by unwanted repetitive actions then they are called neuroses or neurotic disorder.

Obsessive Compulsive Neurosis

psychopathology

- Q. Present the overall picture of a patient of obsessive Compulsive neurosis. or Distinguish between Obsession & Compulsion. Discuss the Clinical features & dynamics of Obsessive Compulsive reaction. or Discuss the symptoms & etiology of Obsessive Compulsive neurosis.

Ans. Obsessive Compulsive neurosis is a composite of Obsession & Compulsion. This neurotic disorder is a composite of Obsession & Compulsion.

Difference between Obsession & Compulsion: Obsession means the absurd ideas which persistently originate in the mind of the patient. The patient understands that such recurring ideas are absurd & meaningless but he is unable to check such ideas.

Kiser says "An obsession is an idea or thought that is silly, absurd, or apparently meaningless, yet the obsessive person can't get rid of it." On the other hand Kiser 1981 says "an obsession is an idea or thought that is silly, absurd, or apparently meaningless yet one that the obsessive person cannot get rid of."

Compulsions are repetitive actions over which the patient has no control, although he understands that such actions are silly & absurd. Kiser says "Compulsions are obsessions carried out into action". Thus Obsession & Compulsion are the two sides of the same coin. Hence they are treated as one and the same neurotic reaction known as Obsessive Compulsive neurosis.

Symptoms (Clinical Picture) - The

Symptoms
the following are the symptoms
or clinical picture of obsessive
compulsive neurosis

following are the symptoms or clinical pic-
tures of a patient suffering from obsessive
compulsive neurosis:-

(1) Washing Rituals - This is a very common
symptom of an obsessive compulsive patient. The patient is found washing his
hands or her hands, clothes or any other thing
frequently. The patient knows that there is
no apparent reason behind such
behavior but he or she is unable to re-
ason for such behavior.

(2) Tracing - Kicker quoted that
he has coated a female patient who used
to wash her fingers very frequently. She
was never satisfied before her fingers
became reddish after repeated rubbing.

(3) Similarly lady Macbeth of Shakespeare's
drama "Macbeth" suffered from hand
washing ritual. She went on washing her
hands over & over until the skin was
tender & raw. It should be noted that such
behavior may be observed in a normal person
also. The difference lies in the fact that
normal person is satisfied after washing
his hands after a very short repeat,
but the patient is not satisfied
before doing it time & again.

(2) Counting Ritual - This is also a common
counting ritual symptom of the patient of obsessive
compulsive neurosis. Some patients sit
at a particular place & goes on counting
the incoming & the outgoing of vehicles.

here the patients have obsession of poles - .
Some patients have obsession of vehicles, electric
goods, roads, steps, etc. (3)

Some patients are found counting the number of electric poles while passing through the roads. Similarly some patients are found counting the steps of the stairs which they climb too. The patient under the patient knows that such behaviors are meaningless but he or she is not able to check such behavior. Again this behav. may be observed in a normal person also. The difference lies in the fact that the normal person repeats this behav. infrequently whereas the abnormal person repeats it frequently.

(3) Touching Ritual - The touching ritual is also observed in some of the patients of obsessive-compulsive neurosis. Some patients are found touching the electric poles while they pass by them. Some patients are found touching the trees standing by the side of the roads. If any one tree or pole is left untouched the patient becomes restless & is not satisfied until he or she touches it. Here also the patient knows that such behavior is silly & unwanted. However the patient is helpless to have control over it. (Here also the abnormal person differs from a normal person only in degree.)

(4) Collecting Ritual - Some patients of obsessive-compulsive neurosis suffer

(4) Collecting rituals -
Collecting & Counting ritual. They are interested
in collecting certain useless objects such
as used stamps & the similar things.
They are very well understand that such
behav. is unwelcome & unwanted but
they are unable to restrain themselves
from doing it. If the patients are not
allowed to do such behavior, they
become anxious & restless. However
a normal person sometimes may com-
mit such behav. but he is not restless
& is not anxious for repeating it.

(5) Kleptomania - It means a strong
desire to steal. The patient suffers
from the urge to steal, which is very
strong & uncontrollable. The patient
understands that stealing is meaning-
less & aimless. But he or she is
helpless & cannot remain peaceful
without stealing. ~~Kister~~ It should
be noted that Kleptomania differs
from ordinary stealing. An ordinary
stealer steals something for the
fulfilment of some objective. On the
other hand the patient steals some-
thing without any operant objective
or desire. Kister has coated one young woman
who was caught red handed after
she reported a record of 136 stolen meals. She
was asked "Why did you steal?"
She replied, "I don't know. There

(5)

Kleptomania

without any ^{intention} ~~consciousness~~ to steal from others
but she ^{has} ~~had~~ ^{the desire} to steal from others
to check it "not This indicates that Kleptomania is not based on any
Kleptomania is ^{based on some} ~~conscious~~ ^{opposite} apparent motive of the patient
unconscious motivation rather it is based on some unconscious
motivation.

Pyromania

6) Pyromania — This means the desire
it means desire to set fire. The patient is interested
in setting something on fire. He under-
stands that setting fires may cause
harm to others & to himself but he
is unable to check himself from
setting fires. Here also Pyromania
A normal person is diff. from ordinary setting fires. A
normal person sets fire for achieving
some tangible goals. On the other
hand the patient has no tangible
goal & he does it only because he
gets satisfaction out of it. Kidder has
Coated a 14 yr. old Baltimore boy
who committed setting fires a number of
times. At last he was caught & he
confessed that he committed such
behav. due to the compulsion from
within. This indicates that pyromania
is also based on some hidden moti-

Suspicion & doubt

7) Suspicion & doubt — This is also
very common symptom of obsessive
compulsive neurosis. The patient suffers
from various types of doubts & so
doubt & suspicion.

Patient don't what
they have not to need the door & open
patient & they can't do it time & again

general suspisions. Some patients doubt if they have locked the door or not. They check it time & again & go on checking it before they fall asleep or are exhausted. A normal person also may have doubt about his or her bed during night whether the door is locked. The door is checked once or twice & the doubt is undone. On the other hand the patient is satisfied only after checking it until he or she is exhausted. Some patients doubt whether their husbands or wives are faithful. Kicker has quoted an instance in which a mechanic who developed the idea of that he was not the real father of the eight yr. old daughter.

Hypo. 8) Hypochondria - In certain cases of Obsessive Compulsive neurosis hypochondria is observed. Complaints relating to physical health are also observed. Some patients develop the idea that they are going to die very soon. Some patients develop the idea that they are in the clutches of dangerous diseases and are going to die soon. Conroy is the far gone possibility. Kicker (1981) has cited the example of a woman who developed the idea of broken glass in her food. Kicker (1981) has reported a case of a woman who developed the idea of broken glass in her food.

A normal person can
overcome his fears
but the
obsessive person cannot
overcome symptoms as mentioned above. On the basis
of these symptoms or clinical picture the
patient can be differentiated from other
neurotic patients.

It is evident that the patient has severe
symptoms as mentioned above. On the basis
of these symptoms or clinical picture the
patient can be differentiated from other
neurotic patients.

Etiology (Dynamics) - The foll: are
the following all the factors relating to the dynamics of
obsessive Comp. neurosis.

Substitutive thoughts & Activities:-

Masser Man (1961) has explained that substitutive thoughts & activities are the real cause of this mental illness. The patient defends himself from anxiety & conflict by developing obsessive Comp. behaviors.

In some cases reaction formation is the defence mechanism adopted by the patient. The patient satisfies his or her repressed desires by developing reaction

The patient satisfies his repressed formation. Coleman has sighted the e.g. of a farmer who developed the idea

his desire to hit his 3-yr-old son over the head with a hammer. The mechanism

Coleman cited analyses showed that due to the child's birth the farmer was refused several relations by his wife & so unconscious

wanted to get rid of the child. He wanted to get rid of the child because he felt guilty & fear of punishment - Acc.

As related in the birth to Coleman guilt feeling is a great cause of this mental disorder. He has sighted the analysis of lady Macbeth who suffered from hand washing. The fact is

Guilt feeling & fear of punishment

Coleridge considers guilt & punishment as
a fear of causing neurosis. (8)

important that she was responsible for the bloody
murder of King Duncan. Later she realized
her mistake & suffered from guilt feeling
lady Macbeth & the feeling of self condemnation. Thus she
had developed the idea that her hands were
dirty. Her washing behavior was the result
due to guilt. and of her feeling of guilt & punishment.

(3) Aggression & Hostility — Kisker is of opinion
that aggressive urge is the cause of
Hostility. Obsessive Compulsive behaviors. The patient
says that satisfies his hostile thoughts by deve-
loping pyromania & other similar behav-
iors. Kisker has said "the obsessive Compul-
sive urge is the neurotic patient's preoccupation with fire & setting
fires can be interpreted behaviorally
as a revenge reaction which satisfies
the patient's hostile thoughts & the aggressive urge
to act."

(4) Unconscious Conflicts — Acc. to psychodynamic
approach obsessions & compulsions
develop in order to resolve unconscious
conflicts. For e.g. a person was obsessed
with the idea that he would drive
his car off the side & over an embank-
ment. Psychoanalytic interpretation
revealed that unconsciously he
wanted to kill himself & that his
obsession was the outcome of his
unconscious conflict. Kisker has reinter-
preted "the psychodynamic approach views
of symptoms as symptoms of