

TREATMENT RESISTANCE IN OBSESSIVE COMPULSIVE DISORDER: FOCUS ON ASSESSMENT

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ASSESSMENT OF FUNCTIONAL CONSEQUENCES IN OCD

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DISCLOSURE SLIDE

- No Disclosures

FUNCTIONAL CONSEQUENCES OF OCD

○ Functional Consequences

- Everyday positive and negative outcomes of one's obsessive compulsive behavior, outside prevention of a feared consequence
- Idiosyncratic reasons why individuals may hesitate to engage fully in treatment

OBSESSIVE COMPULSIVE CONSEQUENCES SCALE - REVISED (OCCS-R)

- Self-report measure to assess a variety of functional consequences
 - 35 items
 - 1-5 Likert Scale
- Broadly applicable to the entire span of symptom severity
- Captures both positive and negative consequences

POSITIVE CONSEQUENCES

- My compulsive behaviors keep my life structured and orderly.
- My obsessive-compulsive behaviors make me unique.
- My obsessive-compulsive behaviors reflect my value system.
- My rituals are based on behaviors (organization; cleanliness) valued by others.
- My obsessive-compulsive behaviors reinforce my sense of self.
- My obsessions and/or compulsions reflect my concern for the welfare of other.

SAFETY

- My rituals prepare me for the unforeseen future.
- My obsessive thoughts alert me to risky situations.
- My obsessions and/or compulsions keep people I care about safe.
- My rituals help give me a feeling of control in my life.

NEGATIVE CONSEQUENCES

- My obsessions and/or compulsions make my life miserable.
- My obsessive-compulsive behavior limits my ability to engage in social activities.
- My obsessions and/or compulsions make it hard to get close to people.
- When I am engaged in my rituals I feel alienated from myself.

ADEQUACY

- I am happy with the quality of life my obsessions and/or compulsions provide.
- I like what my obsessive-compulsive behavior does for me.
- The level of my obsessive-compulsive behavior is as low as I want it to be.
- On balance, my obsessive-compulsive behavior has resulted in more positives than negatives.

OCCS-R: PSYCHOMETRICS

| Data Analyses | Value | Sample Size (n) |
|-------------------------------------|-----------------------------------------------|-----------------|
| Item-Total Correlations | $r \geq .40$ | n=495 |
| Internal Consistency | Alpha = .945 Spearman Brown = .92 | n = 413 |
| Internal Consistency: Components | Alpha \geq .79 Spearman Brown \geq .78 | n = 464 |

OCCS-R: VALIDITY

| Scale | OCCS Total | General Negative | General Positive | Keeping People Safe | Adequacy |
|------------------------------------------------|------------|------------------|------------------|---------------------|----------|
| Y-BOCS-SR Total | .46** | .45** | .30** | .38** | .21** |
| WSAS | .44** | .69** | .18** | .32** | .005 |
| Insight | .16** | -.09 | .26** | .14** | .22** |
| Avoidance | .22** | .33** | .12** | .16** | -.00 |
| Willingness to Participate in Future Treatment | .25** | .39** | .08 | .18** | -.01 |
| Expected Effectiveness of Future Treatments | .30** | .42** | .11* | .25** | .05 |

*Correlation is significant at the 0.05 level (2-tailed).

**Correlation is significant at the 0.01 level (2-tailed).

OCCS-R: MOTIVATION

- Related to patient's treatment motivation, willingness to participate, and their perception of it's effectiveness.
- Negative Functional Consequences increase motivation to engage in treatment
- Positive Functional Consequences are related to less motivation to engage in treatment

WHEN IS THE OCCS-R HELPFUL?

- At intake to determine client's overarching perception of their symptoms (i.e., positive or negative)
- When the client appears “unmotivated” or does not comply fully with treatment
- When the client is avoiding addressing certain symptoms but willingly addresses others

APPLICATION OF THE RESULTS

- Negative consequences
 - Help identify reasons for changing OCD symptoms
 - Provides motivational features to capitalize on
- Positive Consequences
 - Identify reasons why people hold onto their symptoms and provide treatment targets
- Patient Evaluation