TREATMENT RESISTANCE IN OBSESSIVE COMPULSIVE DISORDER: FOCUS ON ASSESSMENT

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ASSESSMENT OF FUNCTIONAL CONSEQUENCES IN OCD

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April, 2012
ADAA
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
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.
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.
NEGLIGENCE 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.
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

<table>
<thead>
<tr>
<th>Data Analyses</th>
<th>Value</th>
<th>Sample Size (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item-Total Correlations</td>
<td>r ≥ .40</td>
<td>n=495</td>
</tr>
<tr>
<td>Internal Consistency</td>
<td>Alpha = .945, Spearman Brown = .92</td>
<td>n = 413</td>
</tr>
<tr>
<td>Internal Consistency: Components</td>
<td>Alpha ≥ .79, Spearman Brown ≥ .78</td>
<td>n = 464</td>
</tr>
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</table>
# OCCS-R: VALIDITY

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

*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 its effectiveness.
  - Negative Functional Consequences increase motivation to engage in treatment
  - Positive Functional Consequences are related to less motivation to engage in treatment
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**