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What Can You Do to Help Cope with Your OCD?

These final chapters will examine how someone with OCD can help themselves and seek treatment. Advice will be given on setting up a self-treatment grade exposure with response prevention programme (ERP), as well as resources and organisations which can be helpful in achieving this. The advice will be given as a step-by-step guide for developing a personal ERP programme to tackle OCD.

It will also examine what to do if an individual is finding difficulty accessing help and will give useful contacts and organisations as well as written material.

OK, I Have OCD but How Do I Get Help?

This next section is geared to people living in the UK but may also be applicable to other countries. OCD (and body dysmorphic disorder (BDD)) have official guidance produced by the National Institute for

Health and Care Excellence (NICE). This body declares the treatment you should receive within the NHS and is produced for England and Wales. In Scotland, NICE guidance is adopted by the Scottish Intercollegiate Guidelines Network (SIGN) which adopts and monitors the application of NICE guidance as well as producing some of its own guidance. In Northern Ireland the body is NICE in Northern Ireland which adopts and monitors the NICE guidance. The original guidance for OCD came out in 2005 but has been regularly updated. The current guidance is lengthy but can be found at:

www.nice.org.uk/guidance/cg31/chapter/1-Guidance

It can also be obtained from HMSO as clinical guideline 31 [CG31], and is available from:

National Institute for Health and Clinical Excellence,
MidCity Place,
71 High Holborn
London, WC1V 6NA

This guidance states that everyone with OCD should have access to specialised OCD treatment. This includes psychological therapy involving exposure and self-imposed response prevention (ERP). The intensity of treatment offered varies with the severity of the condition, but ranges from low intensity (usually ten hours) therapy from local Psychological Services in Primary Care, through to intensive specialised services funded nationally. In addition, the guidance recommends treatment with selective serotonin reuptake inhibitors (SSRIs, e.g. sertraline, fluoxetine, paroxetine, fluvoxamine, citalopram or escitalopram; see Chapter 4) or clomipramine, and advises that those people who do not respond to these or to ERP should additionally be offered a dopamine blocking agent (as discussed in Chapter 3).

In short, everyone in the UK should be able to receive appropriate treatment for OCD. The first thing that someone needs to do to seek help is to visit their GP and ask to be referred for psychological therapy for OCD, or ask to be prescribed an SSRI. If there is any difficulty with this, it is worthwhile referring to the NICE clinical guideline 31 [CG31] (2005). All

GPs should have access to Psychological Treatment in Primary Care Teams (sometime known as IAPT or Increasing Access for Psychological Therapy). Many of these Psychological Services will also accept direct referrals from patients themselves, which can be useful if you do not feel able to discuss your worries with your GP. Every region should have such services, but the waiting lists can vary from days, to in some cases, months.

In some situations your GP may refer you directly to other mental health services which will then decide with you the best course of action to take in your particular circumstances.

Once referred or receiving an appointment, most people with OCD should be offered graded exposure with self-imposed response prevention (ERP; see Chapter 5 for further details). Occasionally, other treatments may be offered if there are complicating diagnoses. For example, people with emotional instability may need to be seen by a specialised team for treatment of this first, or people who have experienced extreme trauma may need to address that first. Sometimes people with OCD are offered anxiety management training. Where this can be helpful to address some of the symptoms of anxiety, it is not generally helpful for OCD. If worried you are not receiving the correct help, then you should raise this with your therapist.

If the treatment in the Primary Care Service does not help, you should be moved into secondary care services and eventually should be sent to a specialist team who specialise in OCD. Some parts of the country have specialised regional treatment centres for OCD, although unfortunately this is not true of every region. In addition, there is a shortage of therapists specialising in the treatment and management of OCD. However, it is usually possible to find someone locally.

If an individual has not responded to treatment locally and has been offered the treatments listed above, then they may need to be referred to a National Treatment Centre for OCD. For England and Wales, people who fail to respond to a range of treatments locally can be referred to a Highly Specialist Team for OCD and BDD via the provision of NHS England Highly Specialist Services for OCD and BDD. Details can be found here:

www.england.nhs.uk/wp-content/uploads/2013/06/c09-sev-ocd-boy-dysm.pdf
www.swlstg-tr.nhs.uk/documents/related-documents/our-services/336-national-service-referral-criteria/file

People with OCD and BDD who live in Scotland, Wales, or Northern Ireland can also be referred to these services via their local services.

What Can I Do to Help Myself?

Some people with OCD may decide to try and tackle the OCD themselves. This may be because they have a mild problem and do not wish to, or are unable to, take time from work or other commitments that therapy may entail. Others may have tried therapy before and found that the pace was too fast and they had difficulty in complying. Others still may just want to try and overcome the difficulties themselves. Whatever the reason, you should remember that overcoming OCD does involve commitment and bravery and can be hard to do on your own. Even if you do not wish to seek professional help immediately, it may be worthwhile contacting one of the self-help groups listed at the end of this chapter.

If you still decide to go ahead on your own, then the following chapters are designed to help guide you through this process. Remember this is not going to be easy and that, inevitably, you will fail and slip back at times. Just treat every slip up as a learning experience which makes you stronger for the future. The next two chapters examine general issues to bear in mind and how to tackle OCD. The successive chapters then concentrate on special considerations in the treatment of different types of OCD.

Are There Any Organisations Which Offer Help and Support?

There are a variety of self-help and support organisations for people with OCD and their families. Many regions have several organisations and the list below is geared to the UK.

Name of Organisation	Website	What they offer	Notes
OCD Action	www .ocdaction .org.uk/	Helpline; website containing information on OCD; books available online; local support; conferences for people with OCD and their families; lobby government and others about OCD matters.	UK's largest OCD charity
OCD UK	http:// ocduk.org	Helpline; website containing information on OCD; books available online; local support; conferences for people with OCD and their families; lobby government and others about OCD matters.	
TOP UK (Triumph Over Phobia)	www .topuk .org/	Offers local treatment groups in some areas; website containing information; lobbying of Government and others about issues relating to OCD and phobic disorders.	Offers its own treatment groups for those with mild to moderate OCD or who do not wish to go through the NHS
MIND	www .mind.org .uk/	Mental health charity which provides information on a variety of mental health issues; lobbying of Government and others on mental health issues.	MIND media awards are prestigious awards given for informative and sensitive portrayal or information on mental health issues.

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Name of Organisation	Website	What they offer	Notes
International OCD Foundation	https://iocdf.org/	Website containing information for people with OCD and healthcare professionals; training courses available for professionals.	This organisation has arisen from the US-based OCD Foundation which seeks to inform the public, educate professionals, and raise awareness of OCD.

KEY POINTS



- There are various ways in which you can access treatment.
- In the UK, all regions should have access to psychological therapies in primary care.
- In the UK, the National Institute for Care and Health Care Excellence (NICE) has published guidance on the treatments people with OCD and BDD should receive. These are published in England but accepted by other parts of the UK.
- Treatments that may be offered may include medication and psychological therapy.
- For psychological therapy, the key component is ERP, but this may be combined with other treatments.
- There are several charities dealing with OCD who can offer you assistance, support, information, and in some cases help to start therapy.
- If treatment in local services is not useful, do not give up as you should then be referred to more specialist services.