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## EXPLORING THE PHENOMENOLOGY OF OBSESSIVE-COMPULSIVE DISORDER: A CROSS-SECTIONAL STUDY

Dr. Tushar Agravat<sup>1</sup>, Dr. Mahesh Tilwani<sup>2</sup>

<sup>1</sup>Associate Professor, Department of Psychiatry, Gujarat Adani Institute of Medical Science, Bhuj, Kutch, Gujarat, India

<sup>2</sup>Professor, Department of Psychiatry, Gujarat Adani Institute of Medical Science, Bhuj, Kutch, Gujarat, India

**Corresponding author:** Dr Mahesh Tilwani, Department of Psychiatry, Gujarat Adani Institute of Medical Science, Bhuj, Kutch, Gujarat, India

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### Abstract

**Background and Aim:** Obsessive Compulsive Disorder (OCD) is an anxiety disorder that affects both men and women with similar prevalence. The explanations surrounding obsessive-compulsive neurosis are rooted in psychological theories. The objective of this research was to examine the socio-demographic characteristics of patients diagnosed with obsessive-compulsive disorder (OCD) and to explore the phenomenology associated with their obsessions and compulsions.

**Material and Methods:** The research was conducted at the Outpatient Department of the Psychiatry Division within a Tertiary Care Teaching Institute in India, spanning a period of one year. A total of 100 samples were incorporated into the study. A socio-demographic and clinical proforma is utilised to gather demographic information. The Y-BOCS checklist: The Yale Brown Obsessive-Compulsive Scale is widely recognised as the benchmark for assessing the severity of obsessive-compulsive disorder (OCD) symptoms and evaluating treatment outcomes.

**Results:** Findings indicate that the most prevalent type of obsession was related to "thinking." In 78% of instances, it was observed. In the analysis, fears were observed in 46% of cases, while doubt was noted in 42% of instances. Contamination emerged as the most prevalent issue, occurring in 60% of the cases examined. Among individuals over the age of 30, obsessive thinking was observed in 76% of cases, while fears were present in 44% and doubts in 36%. Contamination was detected in 52% of patients, while aggression was observed in 24% of the cases. Doubt emerged as the second most prevalent form among males at 48%, while fear held the same position among females, also at 48%.

**Conclusion:** The most prevalent forms of obsession and compulsion among patients under 30 years of age, regardless of gender or marital status, were identified as thinking and yielding, respectively. Additionally, contamination emerged as the most common theme of obsession.

**Key Words:** Fear, Obsessive Compulsive Disorder, Thinking, Yielding

### INTRODUCTION

Obsessive-compulsive disorder (OCD) is a clinical condition marked by persistent, intrusive thoughts that generate significant anxiety, alongside compulsive actions that, despite being acknowledged as illogical, result in considerable distress and hinder daily functioning. The prevalence rates of obsessive-compulsive disorder (OCD) are estimated to be between 2 to 3 percent globally, while in India, the figure is notably lower at 0.6 percent.<sup>1</sup> The condition appears to affect both genders with similar prevalence, though it is observed that males often experience symptoms at an earlier age. To establish a definitive diagnosis of obsessive-compulsive disorder (OCD) as outlined in the ICD-10, individuals must exhibit obsessional symptoms, compulsive behaviours, or a combination of both on the majority of days over a minimum period of two consecutive weeks. These symptoms should also cause significant distress or disrupt daily activities.<sup>2</sup>

The estimated prevalence reported in various studies falls between 0.4% and 2.5%.<sup>3,4</sup> The incidence among adult psychiatric patients varies, with estimates indicating that it ranges from 0.6% to 2% for outpatients.<sup>5</sup> An epidemiological study conducted in India revealed a lifetime prevalence rate of 0.6%.<sup>6</sup> Males experience a notably earlier onset compared to females.<sup>7</sup> The early onset of symptoms was linked to the presence of sexual obsessions, hoarding behaviours, repetitive rituals, and compulsions related to the need to touch.<sup>8</sup> Both males and females exhibited nearly equal representation among those identified as compulsive checkers. Compulsive washing

behaviours are observed in 66% of women, while 26% exhibit avoidance tendencies.<sup>9,10</sup> A higher percentage of bachelorhood and celibacy has been observed in patients with OCD when compared to matched controls.<sup>11</sup>

The defining characteristics of OCD include anxiety-inducing obsessions and compulsive behaviours, which are essential to its manifestation. Nonetheless, the specific content of these symptoms can vary significantly. This highlights compelling evidence of the significant variability in symptoms associated with OCD. "Form" pertains to the structures of "phenomena," while "content" signifies the meaning that is reflected. Researchers identified six distinct forms of obsessions. Persistent uncertainty, Compulsive urges, Intense apprehension, Intrusive imagery, Recurrent thoughts, and Various other concerns.<sup>11</sup>

Most authors have identified two distinct forms of compulsions: yielding and controlling compulsions. The phenomenon of yielding compulsion serves as a compulsive framework that articulates the deeper obsessive drive. Managing compulsion often manifests as a compulsive behaviour that redirects the core obsession without allowing it to be fully expressed.

A recent study conducted in the West revealed that contamination was reported in 45% of cases, with doubt at 42% and somatic concerns at 36% being the most prevalent obsessions. In terms of compulsions, checking behaviours were observed in 63% of participants, followed by washing at 50% and counting at 36%.<sup>12</sup> A recent study identified that the most prevalent types of compulsions include repeating at 40%, checking at 35%, and cleaning at 51%.<sup>13</sup> Subsequent research has shown that individuals with 'phobic ruminative' tendencies tend to perform better than those with obsessive-compulsive traits.<sup>6,14</sup> Phenomenology involves a detailed examination and accurate portrayal of psychological events, which are essential for grasping psychiatric disorders. This study aims to investigate potential changing trends in phenomenology and various demographic variables associated with OCD over time. The objective of this study was to examine the socio-demographic characteristics of patients with obsessive-compulsive disorder (OCD) and to explore the phenomenology of their obsessions and compulsions.

## MATERIAL AND METHODS

This study was done at OPD Unit of the Department of Psychiatry, Tertiary Care Teaching Institute of India for the duration of 1 year.

### Inclusion Criteria

1. All cases diagnosed as per ICD-10 diagnostic guidelines for OCD.
2. Patients of the Age group 18 to 65 years.
3. Patient Agrees to participate in the study by providing written informed consent.

### Exclusion Criteria

1. Patients with severe organic involvement of central nervous system or serious physical illness.
2. Uncooperative and agitated patients.
3. Patients having active substance abuse or intoxicated patients.

A total of 100 samples were incorporated into the study. A socio-demographic and clinical proforma was utilised to gather demographic information. The Y-BOCS checklist: The Yale Brown Obsessive-Compulsive Scale is widely recognised as the benchmark for assessing the severity of obsessive-compulsive disorder (OCD) symptoms and evaluating treatment outcomes.

### Statistical analysis

The collected data was organised and input into a spreadsheet application (Microsoft Excel 2019) before being exported to the data editor interface of SPSS version 19 (SPSS Inc., Chicago, Illinois, USA). Quantitative variables were characterised using means and standard deviations or medians and interquartile ranges, depending on their distribution. Qualitative variables were reported in terms of counts and percentages. The confidence level for all tests was established at 95%, while the level of significance was set at 5%.

## RESULTS

The patients' ages ranged from 18 to 57 years, with an average age of 29.9 years. Among them, 46 patients (46%) were aged 18 to 24 years, 20 patients (20%) were between 25 and 33 years, 24 patients (24%) were between 34 and 42 years, 4 patients (8%) were aged 43 to 50 years, and 2 patients (4%) were between 51 and 57 years (see Table 1). Table 2 indicates that 44 patients (44%) were male and 56 patients (56%) were female.

In terms of obsession types, "thinking" was the most prevalent, occurring in 78% of cases. Fears and doubt were reported in 46% and 42% of cases, respectively. The most common content of obsessions was contamination,

affecting 60% of patients, while sexual content was present in 26%, and both aggression and religious content were noted in 24% of cases each. Yielding was the most frequent compulsion, observed in 78% of cases, followed by controlling compulsions at 38%, with both types occurring together in 24% of cases. Notably, 4 patients (8%) exhibited no compulsions. Cleaning and checking compulsions were found in 58% and 52% of cases, respectively.

Among patients, 38% experienced a single form of obsession, while 62% had multiple forms. Obsessions with a single content were present in 42% of patients, while those with multiple contents were found in 58%. In patients younger than 30 years, the forms of obsession included thinking (78%), doubt (48%), and fears (48%). The content of their obsessions revealed contamination in 68% and sexual content in 36%. Yielding compulsions were also present in 78%, with cleaning and checking compulsions found in 64% and 52%, respectively.

In patients over 30 years of age, thinking as a form of obsession was observed in 76%, fears in 44%, and doubt in 36%. The content of obsessions revealed contamination in 52% and aggression in 24% of patients. Yielding compulsions were noted in 72%, while cleaning and checking compulsions were reported in 52% and 48%, respectively.

Thinking was the most common form of obsession in both males and females, although it was more prevalent among males. For males, the second most common form was doubt (48%), while for females, it was fear (48%). Although contamination was the most common obsession content for both genders, it was more frequently reported among females. Additionally, symmetry content was more common in males.

**Table-1: Age distribution of patients**

Age group (years)	Number (N)	Percentage (%)
18-24	44	44
25-33	20	20
34-42	24	24
43-50	4	8
51-57	2	4
Total	100	100

**Table-2: Gender wise distribution of patients**

Gender	Number (N)	Percentage (%)
Male	44	44
Female	56	56
Total	100	100

**Table 3: Age-wise distribution of obsessions and compulsions**

Obsessions	Up to 30	Above 30
<b>Form</b>		
Doubt	24	18
Thinking	40	38
Fears	24	22
Impulses	8	10
Images	6	4
<b>Content</b>		
Aggression	12	12
Contamination	34	26
Sexual	18	8
Hoarding	0	0
Religious	14	10
Symmetry	10	10
Somatic	2	4
Others	0	0
<b>Compulsions</b>		
Yielding	42	36
Controlling	18	20
Both	14	10
No compulsions	4	4
Cleaning	32	26

Checking	28	24
Repeating	6	4
Counting	6	6
Ordering	8	6
Miscellaneous	6	4

**Table 4: Gender wise distribution of obsessions and compulsions**

Obsessions	Male (44)	Female (56)
<b>Form</b>		
Doubt	24	18
Thinking	42	36
Fears	22	24
Impulses	8	10
Images	8	2
<b>Content</b>		
Aggression	12	12
Contamination	28	32
Sexual	18	8
Hoarding	0	0
Religious	10	14
Symmetry	14	6
Somatic	2	4
Others	0	0
<b>Compulsions</b>		
Yielding	30	48
Controlling	20	18
Both	14	10
No compulsions	2	6
Cleaning	28	30
Checking	30	22
Repeating	6	4
Counting	6	6
Ordering	10	4
Miscellaneous	2	2

**DISCUSSION**

The current research utilised ICD-10 criteria for diagnosing OCD, contrasting with earlier studies that relied on ICD-9 and DSM-III for their diagnostic frameworks.<sup>11,15</sup> The current research revealed that among patients under the age of 30 years Contemplation and uncertainty often manifest as the most prevalent types of obsessions. Contamination and sexual themes emerged as the most prevalent subjects of obsessions. The most prevalent type of compulsion observed was yielding compulsion. Inspection and maintenance were observed in and respectively. Previous research has indicated that early onset is linked to the presence of sexual obsessions, hoarding behaviours, repetitive rituals, and compulsions related to touching.<sup>4</sup> In individuals over the age of 30, obsessive thoughts were the most prevalent form of obsession observed. Contamination emerged as the most prevalent type of obsession, affecting 56% of individuals, with aggression following closely behind. Yielding emerged as the most prevalent form of compulsion, observed in 76% of patients.

The current study revealed that 44% of participants were male, while 56% were female. Previous research indicates that women exhibited compulsive washing behaviours at a rate of 66%, while avoidance behaviours were noted in 26% of cases.<sup>9,10</sup> Research indicates that male patients exhibited a higher prevalence of sexual-religious and aggressive symptoms. Numerous studies have highlighted the notable prevalence of OCD among females.<sup>16, 17</sup> An Indian study indicated that females in the developing country exhibited a lower rate of seeking psychiatric assistance.<sup>18,19</sup>

In the realm of psychological studies, it has been observed that the most prevalent form of obsession is related to thought processes. Contamination emerges as the most frequent theme within these obsessions, while yielding stands out as the most common compulsion, particularly when considering gender differences. The second most prevalent form was characterised by doubt among males and fear among females. Cleaning and checking occurred more frequently among males compared to females.

The significant prevalence of religious, moral, and sexual content in the index study likely underscores the strong focus of Hindu culture on issues related to sex, morality, and religion. In the index study, aggressive content was identified in 24% of the cases examined. This figure is significantly lower than what is typically observed in Western literature, which may indicate a more submissive disposition among the Indian population. Previous studies have identified that among various forms, impulses and images exhibited the lowest frequency. The current research aligns with previous studies that highlight a significant prevalence of doubt across different types of obsessions.<sup>12,20</sup>

This study revealed that yielding to compulsions was observed in 78% of cases, while controlling them was noted in 38% of instances. Previous research indicates that in one third of cases, compulsions were not present, suggesting that compulsions may not occur independently of obsessions. This is because compulsions are typically intended to alleviate or avert the distress associated with a feared event or circumstance.<sup>21</sup>

There is a pressing need for additional trans-cultural studies to explore the potential influence of culture on the phenomenology of obsessive-compulsive disorder.

### Conclusion

Thinking and Yielding were the commonest form of obsession and compulsion respectively in patients younger than 30yrs in both genders irrespective of the marital status. Also, Contamination was the commonest content of obsession. Among the form of obsessions, doubt and fear were the second most common in males and females respectively. Also fear was the commonest form in the single (unmarried) group. Thinking and Yielding were the commonest form of obsession and compulsion respectively in patients younger than 30yrs in both genders irrespective of the marital status. Also, Contamination was the commonest content of obsession. Among the form of obsessions, doubt and fear were the second most common in males and females respectively. Also fear was the commonest form in the single (unmarried) group. Though the neurobiology is similar in all individuals, phenomenology differs between individuals concerning gender, religion and culture. While delivering non-pharmacological treatment, phenomenology helps to create better insight in patients concerning their gender, religion and culture.

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