



*San Diego's Voice On Mental Illness*

How common is OCD among children and adolescents?

- **Approximately one million children and adolescents in the United States suffer from OCD. This can mean three to five youngsters with OCD per average-sized elementary school and about 20 teenagers in a large high school.**
- **OCD is as or more prevalent than many other, better-known childhood ailments.**
- **Attention-deficit/hyperactivity disorder (ADHD), the most common psychiatric illness among children, affects just over a million children in the United States. About 100,000 youngsters 19 years-old or younger are diagnosed with diabetes.**

## **Child and Adolescent Obsessive-Compulsive Disorder (OCD)**

Obsessive-compulsive disorder is an anxiety disorder characterized by involuntary thoughts, ideas, urges, impulses, or worries that run through one's mind (**obsessions**) and purposeless repetitive behavior (**compulsions**).

Some of the most common obsessions are fear of contamination or a serious illness, fixation on lucky/unlucky numbers, fear of danger to self and others, need for symmetry or exactness, and excessive doubt.

Some of the most common compulsions are repetitive rituals such as cleaning or washing, touching, counting, repeating, arranging or organizing, checking or questioning,

and hoarding.

OCD affects children and adolescents during a very important period of social development. Schoolwork, home life, and friendships are often affected. Some children with OCD are too young to realize that their thoughts and actions are unusual. They may not understand or be unable to explain why they must go through their rituals. But older children may feel embarrassed—they don't want to be "different" from their peers and may worry that they are "going crazy".

Fearing ridicule, children may hide their rituals when in front of friends at school or at home and become mentally ex-

hausted from the strain. Some families resort to counting the number of bars of soap used daily as the only way to track a child's washing rituals.

Other children find their rituals so time-consuming that they are too tired to play with friends or concentrate in school.

OCD in children often exists concurrently with motor tics and/or Tourette's syndrome.

The onset of OCD symptoms may occur as early as age three or four, but very young children and parents may not recognize the symptoms.

## **OCD in children and adults**

Although children and adults experience many of the same obsessions and compulsions, children often express their disorder in special ways. Unlike adults, children may not recognize that their obsessions are senseless and that their compulsions are excessive. Very young children try to explain away their habits as being "silly" or simply "necessary".

## OCD and the Family

Children and adolescents with OCD often involve family members in their rituals. For instance, they may insist that their laundry be washed multiple times, demand that the parents check their homework repeatedly, or become outraged if household items are in disarray.

Parents often feel bewildered by their child's odd behaviors and may feel that they are "just a phase". There may be periods of frustration and anger when children repeatedly demand answers to questions or want help in completing their rituals. Tensions may rise especially within the normal dynamics of parent-teen relationships. Parents of children with OCD may feel guilty if they find that the disorder has run in their families. However, OCD is not caused by bad parenting.

Other children within the family may feel neglected while parents focus on helping the child with OCD. Siblings may also be subject to teasing by friends who do not understand OCD.

At this time, researchers cannot predict who will develop OCD, but it has been shown to follow patterns in families. There are indications that the biological imbalance of the brain chemical serotonin can be passed on to succeeding generations. So, the tendency to develop OCD may be inherited, while the actual disorder may not.

*Open Your Mind*



*Mental Illnesses  
Are Brain Disorders*

*1-800-950-NAMI*

## Diagnosis and treatment

A pediatrician, teacher, principal, or school guidance counselor can refer parents to a child psychiatrist who will review the child's behavior with the child, parents, siblings, and possibly the teacher, and use a specially designed interview to diagnose OCD.

As in adults, standard treatment includes medication therapy, behavior therapy, or a combination of both. Drugs recommended for OCD are those that act upon the imbalance of serotonin. A physician should be contacted to recommend which particular medication is best suited for each specific case.

At school, children with severe OCD symptoms may repeatedly check, erase, and redo their assignments, which can result in late and incomplete schoolwork. Classroom concentration and participation may be limited by fears and rituals.

Teachers can be very helpful in supporting a child's treatment of OCD once parents inform them about the disorder. Parents may share information about their child's OCD medication with teachers and provide occasional progress reports. Even if a child's OCD is not active at school, teachers should be informed that treatment for OCD can improve the child's ability to learn.

## NAMI San Diego

NAMI San Diego, a non-profit organization, provides education, support services, and advocacy to improve the quality of life of everyone affected by mental illnesses. It is an affiliate of the National Alliance on Mental Illness (NAMI) and NAMI California. Its membership includes persons with brain disorders, their families, friends, mental health professionals and supportive members of the community.

NAMI offers monthly informational meetings, a monthly newsletter, free educational programs, a lending library of books and video-tapes, and support meetings for consumers and families throughout the county.

For information and support, call

**NAMI San Diego  
Helpline**

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(619) 543-1434**

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