

EPISODIC OBSESSIVE COMPULSIVE DISORDER: A CASE REPORT

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ABSTRACT

An uncommon case of Obsessive Compulsive Disorder (OCD) with episodic course and complete remission in the inter-episodic period is reported here. The patient, a middle aged women had 12 year history of about 10 episodes of OCD, each lasting for about 15-20 days and responds well to anti-obsessional drugs each time in a short period.

Key Words: Obsessive Compulsive Disorder, OCD, Episodic.

Early description of "Obsessions" and "Compulsions", the core clinical symptoms of Obsessive Compulsive Disorder (OCD), including description by Freud, Bleuler, Janet and Kraepelin seems remarkably consistent with the current clinical presentation of OCD (Attullah, 1986). In general, OCD is a chronic and lifelong illness with fluctuation in severity of symptoms over time even with the treatment. A review by Goodwin et al. (1969) of 13 follow-up studies from 1936 to 1970, (most of which were retrospective chart reviews), showed that course of OCD could be divided into three categories:

1. Unremitting and chronic
2. Phasic with period of complete remission
3. Episodic with complete remission that permitted normal social functioning.

Although considerable variation exists between studies, most OCD patients showed an unremitting waxing and waning course. In the first prospective study using DSM criteria, Rasmussen and Tsung (1996) found a "chronic" or "continuous" course in 84% of patients, 14% patients showed a deteriorating course and only 2% an episodic course.

The present investigation showed a different

course in OCD i.e. episodic with complete remission.

CASE REPORT

A 30 year old divorced female, educated upto 6th standard, hailing from middle socioeconomic status, admitted in psychiatric ward with complaints of fear of contamination, fear that her cloths and hands are soiled with faeces, repeatedly washing hands, going to toilet to check the clothes, not able to do any household work and having sleep disturbance for last 15-20 days. On cross sectional and serial Mental State Examinations, she had obsessions of contamination, compulsions for checking and washing, and anxious affect. The severity of symptoms was assessed by administering Yale Brown Obsessive Compulsive Scale (Y-BOCS). The total Y-BOCS score was 30 (Obsessions score 16 and Compulsions score 14). Other routine investigations were within normal limits. She had past h/o about 10 similar episodes during last 12 yrs, each lasting for 15-20 days. Every time she had similar obsessions of contamination and compulsions of checking and

washing and responded well to anti-obsessional drugs (Clomipramine or Fluoxetine) and became completely normal within another 10-15 days. She remains completely symptoms free in the interepisodic period. Each time she continued treatment for not more than 3-4 weeks and there was no seasonal correlation of her symptoms.

This time she was put on Fluoxetine 40 mg and Alprazolam 0.75 mg per day and she recovered completely within next 15 days. Her Y-BOCS score was 2 (Obsessions 2, Compulsions 0) and she was discharged on the same treatment.

DISCUSSION

Little prospective research has been conducted on the course of OCD symptoms. Considerable variability exists in the periodicity, duration and severity of episodes but in approximately 10% of patients; OCD has a malignant deteriorative course. Most researchers have found that OCD is a chronic and lifelong illness with fluctuation in the severity of symptoms. A retrospective study in Austria on 62 patients of OCD showed that continuous course was most common, followed by episodic and deteriorative course (Demal et al., 1993).

Perugi et al. (1998) studied 135 patients of OCD and found that 27.4% had episodic course and 72.6% had a chronic one.

The current presentation focuses on the episodic nature in OCD patient and complete remission of symptoms within 2-3 weeks. It needs to be clarified whether these type of OCD patients with significant past history and quick recovery,

require any prophylactic treatment or not. As this patient becomes completely normal within 15-20 days, it is questionable whether the response is because of antiobsessional drugs or it was just a placebo effect of the drug therapy.

So, this case may have implications for treatment and research strategies in this sub-population of Obsessive-Compulsive Disorder patients.

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