
▪ Obsessions

This factsheet aims to explain obsessions. You will find a description of obsessions, their symptoms, and the treatments available. If you are experiencing obsessive behaviour, you will find suggestions of ways you may be able to help yourself and the possible options open to you. You will also find ideas on how friends and family may help.

What are obsessions?

Obsessions are recurrent and persistent thoughts, impulses or images that are produced in the mind and cause distress to the person concerned. Obsessions can be expressed in a variety of forms. Some people experience obsessive thoughts and images, some have obsessive impulses and others practice obsessive rituals or compulsions.

Obsessive-compulsive disorder, also known as OCD, is characterised by a combination of obsessive thinking and compulsive behaviour, and is often accompanied by feelings of anxiety, depression or both.

Obsessional thoughts

These can be words, ideas, images or doubts that intrude into a person's mind, try as they might to exclude them. People may believe, for example, that their hands have been contaminated with bacteria, they may have internal debates in which arguments are reviewed endlessly, or they may constantly doubt previous actions such as turning the gas off.

Obsessional impulses

These are urges to commit acts, perhaps of a violent, sexual or embarrassing nature. People usually resist these urges strongly and do not carry them out, but they may experience a distressing internal struggle in resisting these impulses.

Obsessional rituals

Also known as compulsions, these include mental rituals, such as counting repeatedly or repetition of certain words or phrases, and physical rituals such as repeatedly washing your hands or constantly changing your clothes.

What are the symptoms of obsessional behaviour?

Obsessions

- Thoughts - such as contamination by bacteria
- Internal debates - such as whether or not to buy something
- Doubts - such as failing to turn off the gas
- Impulses - such as shouting blasphemies in church

Compulsions (obsessional rituals)

- Checking - rituals such as repeatedly checking the gas is turned off
- Cleaning - rituals such as repeated hand washing or domestic cleaning
- Counting - rituals such as counting in sequence
- Dressing - rituals such as setting clothes out in a particular way

**For practical
information and
emotional support:**

SANEline:
0845 767 8000

SANEemail:
sanemail@sane.org.uk

Written by George
Stewart
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SANE 1st Floor Cityside House, 40 Adler Street, London E1 1EE
t: 020 7375 1002 f: 020 7375 2162 w: www.sane.org.uk SANEline: 0845 767 8000 SANEemail:
sanemail@sane.org.uk

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What causes obsessive behaviour?

Obsessive-compulsive disorders often begin when a person is experiencing stressful events, however, the cause is not believed to be as simple as that. It is believed that heredity, genetics and brain-chemistry combine with life-experiences to play a major role in the development of obsessive behaviour.

How common is obsessive behaviour?

Obsessive behaviour can occur in people from all backgrounds, any occupation, and at any time of life. Men and women are both as likely to be affected, however, when the onset is in childhood, boys are more likely to be affected than girls. It is estimated that 2.5% of the UK population is affected by obsessive-compulsive behaviour.

What treatments are available?

Most people diagnosed with obsessive-compulsive behaviour are treated by their family doctor, although a small minority of people may be referred to a psychiatrist or a member of the local Community Mental Health Team for more specialised help. Depending on your symptoms, the severity of the obsession, and your circumstances, the doctor may suggest antidepressant drugs, anxiolytic drugs, some form of talking treatment or a combination of these treatments.

Antidepressants

Antidepressant drugs are used to treat obsessive-compulsive behaviour as well as depression. Antidepressants affect the chemicals in the brain that lift your mood. These drugs can be effective in treating obsessive-compulsive behaviour, however, in themselves they are not a cure for obsessions. The drugs treat the symptoms of the condition, but cannot treat the root cause of the obsession itself. This is why talking treatments are often prescribed in conjunction with antidepressants, so that people can be helped to address the reasons why they developed an obsession in the first place.

It may take a few weeks before the drugs begin to have a noticeable effect, but it is important that you continue to take the drugs or the treatment will not be effective. As with any medication, some people may experience unwanted side-effects. If this happens to you, it is important that you discuss this with your doctor, as they may be able to prescribe a different anti-depressant drug for you. It is normally recommended that you stay on the drug treatment for a period of around six months in order to minimise the chance of the condition recurring.

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Anxiolytic drugs

Anxiolytic drugs, also known as minor tranquillisers, are useful for bringing short-term relief of the distress associated with obsessional symptoms, however, they should not be used for long as people can develop a dependency on the drugs very quickly. Therefore, drugs such as diazepam are usually only prescribed for the temporary relief of the most distressing symptoms. Some people may experience unwanted side-effects. If this happens to you, it is important that you discuss this with your doctor, as they may be able to prescribe a different drug for you.

For more information on drug treatments please see **Medical Methods of Treatment**

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Talking treatments

Talking treatments alone can be effective in treating obsessive behaviour for some people, for others a combination of talking treatments and drug treatment may be the most effective treatment. Talking treatments, such as cognitive behaviour therapy, aim to help people recognise the stress factors in their lives, and work out coping strategies in order to be able to deal with these.

A referral for talking treatments can be arranged by your doctor. However, frequently there are long waiting lists for these types of treatment on the NHS. Free or low-cost counselling is also provided by a number of charities and voluntary organisations and, for those who can afford to pay, there are many private practitioners.

For more information on talking treatments please see **Psychological Methods of Treatment**
Which treatment may be right for me?

Individuals respond to different treatments in different ways. What works well for one person may not work well for another. Speaking to your doctor will help you weigh up the pros and cons of the different treatments available. Your doctor should be able to provide you with information on how treatments work, how effective they are, and what side-effects you may experience. Drug treatment may be extremely effective for some people, others may find talking treatments the best option. Others may find a combination of drug treatment and talking treatments works best for them.

What can I do to help myself?

There are many ways in which you can help yourself cope with obsessive behaviour. It is important that you come to understand the nature of your obsession, its causes and symptoms. If you can recognise the early signs of a relapse or deterioration in your mental health, you can seek help and treatment before your condition worsens.

When you are feeling obsessive about something, it can be difficult to see beyond the day-to-day problems in life. It can be very difficult finding the energy and motivation to actively try and help yourself. However, if you are able to take an active part in your treatment it should help your situation improve.

Self-help groups

Many people find it helpful to meet others in a similar position. It can be very useful to share experiences with other people who may be going through the same thing you are. There are opportunities for mutual support, and you may get ideas of what things other people have found helpful to them. Above all, it is an opportunity to help you realise that you are not alone in how you are feeling.

Fighting negative attitudes

Obsessive thoughts and behaviour can cause people to sink into a cycle of negative thinking. The more anxious you become, the less you are able to find the motivation to help you fight the obsessive behaviour. It can be extremely helpful if you are able to recognise patterns of negative thinking, challenge these yourself, and try and replace them with more positive, constructive thoughts.

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Physical Activity

Although it may be difficult finding the motivation to exercise, it can be very therapeutic to take part in physical activities. Jogging, swimming, sports, even brisk walking can stimulate production of endorphins in the brain that can help lift your mood.

Care for yourself

When you are feeling distressed it is extremely important that you care for yourself. You may feel better if you are able to eat properly, pay attention to your physical appearance, and don't abuse alcohol or drugs. Be kind to yourself, allow yourself treats, and try not to cut yourself off from other people.

Complementary therapies

The following are non-medical treatments that some people find helpful, however it is important that you discuss such treatments with your doctor first in case of any interaction with any treatment they have prescribed. Massage can help to alleviate stress and anxiety making make you feel better. Some people benefit from meditation, yoga, homeopathy and acupuncture.

What can friends and family do to help?

Supporting a friend or relative with obsessive-compulsive behaviour can be hard work and frustrating. However, it can also be immensely satisfying and an opportunity to build a closer relationship. Mental distress can make people withdraw from social situations and relationships and make them reluctant to confide in people and ask for help and support. Friends and relatives can be of great help. They can provide emotional and practical support and encourage people to seek appropriate support and treatment. Friends and family can become involved in treatment plans and, above all, make a person feel wanted, needed and loved.

Where can I find help and support?

There is a wide a range of services available that can help provide care, support and information to people experiencing obsessive and compulsive behaviour, their friends, relatives and carers. You may find some of the following useful:

SANEline / SANEmail

1st Floor Cityside House, 40 Adler Street, London, E1 1EE

helpline: 0845 767 8000

email: sanemail@sane.org.uk

web: www.sane.org.uk

SANEline and SANEmail offer emotional support and information to those experiencing mental health problems, their families and carers.

For practical information and emotional support:

SANEline:
0845 767 8000

SANEmail:
sanemail@sane.org.uk

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British Association for Behavioural and Cognitive Psychotherapies (BABCP)

Victoria Buildings, 9 – 13 Silver Street, Bury, BL9 0EU

tel.0161 797 4484, fax: 0161 797 2670

email: babcp@babcp.com

web: www.babcp.com

A directory of psychotherapists is available online.

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British Association for Counselling and Psychotherapy (BACP)

BACP House, 15 St John's Business Park, Lutterworth, Leicestershire, LE17 4HB
tel. 0870 443 5252
email: bacp@bacp.co.uk
web: www.bacp.co.uk
See website for details of local practitioners.

British Psychoanalytic Council

West Hill House, 6 Swains Lane, London N6 6QS
tel. 020 7267 3626, fax: 020 7267 4772
email: mail@psychoanalytic-council.org
web: www.bcp.org.uk
A linking body of psychoanalytical psychotherapist societies.

Carers UK

20–25 Glasshouse Yard, London EC1A 4JT
carers line: 0808 808 7777, tel. 020 7490 8818, fax: 020 7490 8824
email: info@carersuk.org
web: www.carersuk.org
Information and advice on all aspects of caring.

First Steps to Freedom

PO Box 476, Newquay, TR7 1WG
helpline: 0845 120 2916
email: first.steps@byconnect.com
web: www.first-steps.org
Information and help for people with anxiety problems, 10am -10pm 7days.

National Phobics Society

Zion Centre,
339 Stretford Road, Hulme,
Manchester, M15 4ZY
tel: 0870 122 2325, fax: 0161 226 7727
email: info@phobics-society.org.uk
web: www.phobics-society.org.uk
Information and help for people with obsessions and anxiety problems.

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No Panic

93 Brands Farm Way, Randlay, Telford, Shropshire, TF3 2JQ
helpline: 0808 808 0545
email: ceo@nopanic.org.uk
web: www.nopanic.org.uk
Helpline for people experiencing anxiety problems, 10am -10pm 7days.

OCD Action

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22-24 Highbury Grove, Suite 107, London N5 2EA
Tel: 0845 390 6232
email: info@ocdaction.org.uk
web: www.ocdaction.org.uk/
Helpline, information and support for people experiencing obsessions.

OCD-UK

PO Box 8955, Nottingham, NG10 9AU
email: admin@ocduk.org
web: www.ocduk.org
OCD-UK is the leading national charity, independently working with and for people with Obsessive-Compulsive Disorder (OCD).

Samaritans

The Upper Mill, Kingston Road, Ewell, Surrey KT17 2AF
helpline: 08457 90 90 90, fax: 020 8394 8301
email: jo@samaritans.org
web: www.samaritans.org
24-hour telephone helpline offering emotional support for people who are experiencing feelings of distress or despair.

Triumph Over Phobia (TOP UK)

PO Box 3760, Bath, BA2 3WY
helpline: 0845 600 9601
email: info@triumphoverphobia.org.uk
web: www.triumphoverphobia.com
Helpline offering emotional support for people experiencing obsessions or phobias.

United Kingdom Council for Psychotherapy (UKCP)

2nd Floor Edward House, 2 Wakley Street, London, EC1V 7LT
tel. 020 7014 9955, fax: 020 7014 9977
email: info@psychotherapy.org.uk
web: www.psychotherapy.org.uk
Umbrella organisation for psychotherapy in UK. Regional lists of psychotherapists are available.

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