**Obsessive Compulsive Disorder (OCD)**

Find out about obsessive compulsive disorder (OCD), what causes it, where to get help, and what the main treatments are.

## **More in** [**Obsessive compulsive disorder (OCD)**](https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/)

# Overview – Obsessive compulsive disorder (OCD)

**Obsessive compulsive disorder (OCD) is a mental health condition where a person has obsessive thoughts and compulsive behaviours.**

OCD can affect men, women and children. People can start having symptoms from as early as 6 years old, but it often begins around puberty and early adulthood.

OCD can be distressing and significantly interfere with your life, but treatment can help you keep it under control.

## **Symptoms of obsessive compulsive disorder (OCD)**

If you have OCD, you'll usually experience frequent obsessive thoughts and compulsive behaviours:

* An obsession is an unwanted and unpleasant thought, image or urge that repeatedly enters your mind, causing feelings of anxiety, disgust or unease.
* A compulsion is a repetitive behaviour or mental act that you feel you need to do to temporarily relieve the unpleasant feelings brought on by the obsessive thought.

For example, someone with an obsessive fear of being burgled may feel they need to check all the windows and doors are locked several times before they can leave their house.

Women can sometimes have OCD during pregnancy or after their baby is born. Obsessions may include worrying about harming the baby or not sterilising feeding bottles properly. Compulsions could be things such as repeatedly checking the baby is breathing, and intrusive, unwanted and unpleasant thoughts, images or urges. These can cause anxiety and lead to repetitive behaviours.

If you keep getting these thoughts and they have an effect on your daily life, speak to your GP or health visitor. They can support you or refer you to a specialist mental health team if you need it.

## **Getting help for obsessive compulsive disorder (OCD)**

People with OCD are sometimes reluctant to seek help because they feel ashamed or embarrassed.

OCD is a health condition like any other, so there's nothing to feel ashamed or embarrassed about. Having OCD does not mean you're "mad" and it's not your fault you have it.

There are 2 main ways to get help:

* refer yourself directly to an NHS talking therapies service – [find an NHS talking therapies service in your area](https://www.nhs.uk/service-search/find-a-psychological-therapies-service/)
* see a GP – they'll ask about your symptoms and can refer you to a local talking therapies service if necessary

If you think a friend or family member may have OCD, try talking to them about your concerns and suggest they get help.

If you’re under 18, or want to get help for someone under 18, find out how to get [mental health support for children and young people](https://www.nhs.uk/mental-health/children-and-young-adults/mental-health-support/).

It's unlikely OCD will get better without proper treatment and support.

## **Treatments for obsessive compulsive disorder (OCD)**

There are some effective treatments for OCD that can help reduce the impact it has on your life.

The main treatments are:

* talking therapy – usually [cognitive behavioural therapy (CBT)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/cognitive-behavioural-therapy-cbt/overview/), which helps you face your fears and obsessive thoughts without "putting them right" through compulsions
* medicine – usually a type of antidepressant medicine called [selective serotonin reuptake inhibitors (SSRIs)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/ssri-antidepressants/overview/), which can help by altering the balance of chemicals in your brain

CBT will usually have an effect quite quickly. It can take up to 12 weeks before you notice the effects of treatment with SSRIs, but most people will eventually benefit.

If these treatments do not help, you may be offered:

* an alternative SSRI
* a combination of an SSRI and CBT
* an antidepressant called clomipramine

Some people may be referred to a specialist mental health service for further treatment.

## **Causes of obsessive compulsive disorder (OCD)**

It's not clear what causes OCD. A number of different factors may play a part, including:

* family history – you're more likely to develop OCD if a family member has it. It may be learned behaviour, or possibly because of your genes
* differences in the brain – some people with OCD have areas of unusually high activity in their brain or low levels of a chemical called serotonin
* life events – OCD may be more common in people who have been bullied, abused or neglected, and it sometimes starts after an important life event, such as childbirth or a bereavement
* personality – neat, meticulous, methodical people with high personal standards may be more likely to develop OCD, also people who are generally quite anxious or have a very strong sense of responsibility for themselves and others

## **Support groups**

Living with OCD can be difficult. In addition to getting medical help, you might find it helps to contact a support group or other people with OCD for information and advice.

The following websites may be useful sources of support:

* [OCD Action](http://www.ocdaction.org.uk/)
* [OCD-UK](http://www.ocduk.org/)
* [TOP UK](http://www.topuk.org/)
* [HealthUnlocked OCD support forum](https://healthunlocked.com/ocduk?utm_campaign=obsessive-compulsive-disorder)

OCD Action, OCD-UK and TOP UK can also let you know about any local support groups in your area.

### **Social care and support guide**

The [social care and support guide](https://www.nhs.uk/conditions/social-care-and-support-guide/) has advice about where you can get support if you:

* need help with day-to-day living because of illness or disability
* care for someone regularly because they're ill, elderly or disabled, including family members

[Overview - Obsessive compulsive disorder (OCD)](https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/overview/)

<https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/overview/>

# Symptoms - Obsessive compulsive disorder (OCD)

**Obsessive compulsive disorder (OCD) affects people differently, but usually causes a particular pattern of thoughts and behaviours.**

OCD has 3 main elements:

* obsessions – where an unwanted, intrusive and often distressing thought, image or urge repeatedly enters your mind
* emotions – the obsession causes a feeling of intense anxiety or distress
* compulsions – repetitive behaviours or mental acts that a person with OCD feels driven to perform as a result of the anxiety and distress caused by the obsession
* The compulsive behaviour temporarily relieves the anxiety, but the obsession and anxiety soon return, causing the cycle to begin again.

Most people with OCD experience both obsessive thoughts and compulsions, but one may be less obvious than the other.

## **Obsessive thoughts**

Almost everyone has unpleasant or unwanted thoughts at some point, such as thinking they may have forgotten to lock the door of the house, or even sudden unwelcome violent or offensive mental images.

But if you have a persistent, unpleasant thought that dominates your thinking to the extent it interrupts other thoughts, you may have an obsession.

Some common obsessions that affect people with OCD include:

* fear of deliberately harming yourself or others – for example, fear you may attack someone else, such as your children
* fear of harming yourself or others by mistake – for example, fear you may set the house on fire by leaving the cooker on
* fear of contamination by disease, infection or an unpleasant substance
* a need for symmetry or orderliness – for example, you may feel the need to ensure all the labels on the tins in your cupboard face the same way

You may have obsessive thoughts of a violent or sexual nature that you find repulsive or frightening. But they're just thoughts and having them does not mean you'll act on them.

These thoughts are classed as OCD if they cause you distress or have an impact on the quality of your life.

## **Compulsive behaviour**

Compulsions start as a way of trying to reduce or prevent anxiety caused by the obsessive thought, although in reality, this behaviour is either excessive or not realistically connected.

For example, a person who fears contamination with germs may wash their hands repeatedly, or someone with a fear of harming their family may have the urge to repeat an action multiple times to "neutralise" the thought.

Most people with OCD realise that such compulsive behaviour is irrational and makes no logical sense, but they cannot stop acting on it and feel they need to do it "just in case".

Common types of compulsive behaviour in people with OCD include:

* cleaning and hand washing
* checking – such as checking doors are locked or that the gas is off
* counting
* ordering and arranging
* hoarding
* asking for reassurance
* repeating words in their head
* thinking "neutralising" thoughts to counter the obsessive thoughts
* avoiding places and situations that could trigger obsessive thoughts

Not all compulsive behaviours will be obvious to other people.

## **Getting help**

It's important to get help if you think you have OCD and it's having a significant impact on your life.

If you think a friend or family member may have OCD, try talking to them about your concerns and suggest they get help.

OCD is unlikely to get better on its own, but treatment and support is available to help you manage your symptoms and have a better quality of life.

There are 2 main ways to get help:

* refer yourself directly to an NHS talking therapies service – [find an NHS talking therapies service in your area](https://www.nhs.uk/service-search/find-a-psychological-therapies-service/)
* see a GP – they can either prescribe suitable medicine or refer you to a local talking therapies service if necessary

Contact a GP or care team immediately if you ever feel you cannot go on. You can also:

* call 116 123 to talk to the Samaritans, or email: [jo@samaritans.org](mailto:jo@samaritans.org) for a reply within 24 hours
* contact [NHS 111](https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/)

Read more about [where to get urgent help for mental health](https://www.nhs.uk/nhs-services/mental-health-services/where-to-get-urgent-help-for-mental-health/).

## **Related problems**

Some people with OCD may also have or develop other serious mental health problems, including:

* [depression](https://www.nhs.uk/mental-health/conditions/depression-in-adults/overview/) – a condition that typically causes lasting feelings of sadness and hopelessness, or a loss of interest in the things you used to enjoy
* [eating disorders](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/) – conditions characterised by an abnormal attitude towards food that cause you to change your eating habits and behaviour
* [generalised anxiety disorder](https://www.nhs.uk/mental-health/conditions/generalised-anxiety-disorder/overview/) – a condition that causes you to feel anxious about a wide range of situations and issues, rather than one specific event
* a [hoarding disorder](https://www.nhs.uk/mental-health/conditions/hoarding-disorder/) – a condition that involves excessively acquiring items and not being able to throw them away, resulting in unmanageable amounts of clutter

People with OCD and severe depression may also have [suicidal feelings](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/help-for-suicidal-thoughts/).

[Symptoms - Obsessive compulsive disorder (OCD)](https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/symptoms/)

<https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/symptoms/>

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# Treatment – Obsessive compulsive disorder (OCD)

**Obsessive compulsive disorder (OCD) can be treated. The treatment recommended will depend on how much it's affecting your life.**

The 2 main treatments are:

* talking therapy – usually a type of therapy that helps you face your fears and obsessive thoughts without "putting them right" with compulsions
* medicine – usually a type of antidepressant medicine that can help by altering the balance of chemicals in your brain

A short course of therapy is usually recommended for relatively mild OCD. If you have more severe OCD, you may need a longer course of combined therapy and medicine.

These treatments can be very effective, but it's important to be aware that it can take several months before you notice the benefit.

You can get treatment on the NHS through a GP.

You can also refer yourself directly to an NHS talking therapies service without a referral from a GP.

[**Find an NHS talking therapies service**](https://www.nhs.uk/service-search/find-a-psychological-therapies-service/)

[Find out more about talking therapies on the NHS](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/nhs-talking-therapies/)

If you’re under 18, or want to get help for someone under 18, find out how to get [mental health support for children and young people](https://www.nhs.uk/mental-health/children-and-young-adults/mental-health-support/).

## **Talking therapy**

Therapy for OCD is usually a type of [cognitive behavioural therapy (CBT)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/cognitive-behavioural-therapy-cbt/overview/) with exposure and response prevention (ERP).

This involves:

* working with your therapist to break down your problems into their separate parts, such as your thoughts, physical feelings and actions
* encouraging you to face your fears and have obsessive thoughts without neutralising them with compulsive behaviours; you start with situations that cause the least anxiety first, before moving on to more difficult thoughts

The treatment may be hard work, but many people find that when they confront their obsessions, the anxiety eventually improves or goes away.

People with fairly mild OCD usually need about 8 to 20 sessions of therapist treatment, with exercises done at home between sessions. If you have more severe OCD, you may need a longer course of treatment.

## **Medicine**

You may need medicine if talking therapy does not help treat your OCD, or if your OCD is fairly severe.

The main medicines prescribed are a type of antidepressant called [selective serotonin reuptake inhibitors (SSRIs)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/ssri-antidepressants/overview/). An SSRI can help improve OCD symptoms by increasing the levels of a chemical called serotonin in your brain.

You may need to take an SSRI for up to 12 weeks before you notice any benefit.

Most people need treatment for at least a year. You may be able to stop if you have few or no troublesome symptoms after this time, although some people need to take an SSRI for many years.

Do not stop taking an SSRI without speaking to your doctor first because suddenly stopping can cause unpleasant side effects. Treatment will be stopped gradually to reduce the chance of getting side effects. Your dose may need to be increased again if your symptoms return.

### **Side effects**

Possible [side effects of SSRIs](https://www.nhs.uk/conditions/ssri-antidepressants/side-effects/) include:

* feeling agitated, shaky or anxious
* feeling or being sick
* [diarrhoea](https://www.nhs.uk/conditions/diarrhoea-and-vomiting/) or [constipation](https://www.nhs.uk/conditions/constipation/)
* [dizziness](https://www.nhs.uk/conditions/dizziness/)
* sleeping problems [(insomnia)](https://www.nhs.uk/conditions/insomnia/)
* [headaches](https://www.nhs.uk/conditions/headaches/)
* changes to your sex life

There's also a very small chance that SSRIs could cause you to have [suicidal thoughts](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/help-for-suicidal-thoughts/) or want to [self-harm](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/self-harm/getting-help/). If this happens, contact a GP or go to [your nearest accident and emergency (A&E)](https://www.nhs.uk/Service-Search/Accident-and-emergency-services/LocationSearch/428).

Most side effects improve after a few weeks as your body gets used to the medicine, although some can persist.

### **Pregnancy**

SSRIs can be prescribed if you're pregnant or become pregnant, but this depends on whether your GP thinks the benefits outweigh the risks. Talk to them to help you decide what treatment is best for you.

It's important to look after your mental health during pregnancy as it can affect both you and your baby.

[Find out more about help for mums with OCD on the Maternal OCD website](https://maternalocd.org/finding-help/).

## **Further treatment**

Further treatment by a specialist team may sometimes be necessary if you've tried talking therapy and medicine and your OCD is still not under control.

Some people with severe, long-term and difficult-to-treat OCD may be referred to a national specialist OCD service.

These services offer assessment and treatment to people with OCD who have not responded to treatments available from their local and regional OCD services.

OCD UK has more information about [NHS Specialist OCD Treatment Services](https://www.ocduk.org/overcoming-ocd/accessing-ocd-treatment/accessing-ocd-treatment-through-the-nhs/specialist-ocd-treatment-services/), including adult and child and adolescent services.

## **OCD support groups**

Many people with OCD find support groups helpful, as they can:

* provide reassurance and coping advice
* reduce feelings of isolation
* offer a chance to socialise with others
* provide information and advice for family members and friends

The national charities [OCD Action](http://www.ocdaction.org.uk/), [OCD-UK](http://www.ocduk.org/) and [TOP UK](http://www.topuk.org/) can provide information about support groups in your area:

* [OCD Action support groups](http://www.ocdaction.org.uk/support-groups)
* [OCD-UK support groups](http://www.ocduk.org/support-groups)
* [TOP UK support groups](https://www.topuk.org/top-uk-groups/)

You may want to visit the [HealthUnlocked OCD forum](https://healthunlocked.com/ocduk), where you can discuss all aspects of the condition with others who have OCD.

[Treatment - Obsessive compulsive disorder (OCD)](https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/treatment/)

<https://www.nhs.uk/mental-health/conditions/obsessive-compulsive-disorder-ocd/treatment/>

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