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## Examples of OCD

Margo is a 48 year-old married woman who lives with her husband. She has two adult children from a previous marriage. She is a full time homemaker and her husband runs his company from their home. During the past year her elderly mother moved in with them. For the past 30 years Margo has experienced daily obsessions about getting seriously ill or dying due to exposure to germs, bacteria, viruses or other contaminants. She spends much of the time feeling extremely distressed about the possibility contaminants have made contact with her hands, nose, eyes, mouth or ears. Her obsessions increase in frequency and intensity whenever she has to touch anything in the bathroom or kitchen in her own home. Other triggers include public toilets, doorknobs, garbage containers, drains, dirty laundry, handling money, and the bottom surface of shoes. In response to her obsessions Margo engages in several compulsions. She insists that her family and any visitors leave their shoes outside and she wipes the bottom of her family's shoes with a bleach solution every day. Second, she engages in compulsive hand washing that is performed in set way each time and is taking much longer than it did in the past. Margo has also noticed that her hands are often raw and sore from the harsh soap and scrubbing, even though she usually wears gloves. Margo has ruined many items of laundry by putting in too much bleach due to her fear that the dirty laundry contains dangerous contaminants. Margo spends many hours each day cleaning the fridge, the bathroom, sink drains, and other surfaces in her home. She often gets angry at her mother or husband for their use of the bathroom or kitchen and often stops whatever she is doing to compulsively clean any surfaces or items they have touched or used. This has led to significant tension that has strained her marriage and her relationship with her children and mother. Margo does not leave home without carrying anti-bacterial hand lotion at all times even though her physician has told her this is unnecessary. She frequently wears leather gloves out of the home and she is careful to not bring them into her home as it feels like this would contaminate her house. She has set aside a special area in the garage where she leaves any objects that feel contaminated. Since her mother moved in Margo has experienced an increase in her obsessions, even though her mother does not have any contagious illnesses. Margo feels exhausted and fearful much of the time. She is aware that she cleans excessively but if she is prevented from compulsive cleaning or comes in contact with something that feels dirty she has often experienced full panic attacks. As a result of her OCD she is very socially isolated and she often feels depressed.

Taylor is a 25 year old woman who gave birth to her first child almost one year ago. She has always been a slightly anxious person but in the past her anxiety had never created any significant problems or distress. When she found out she was pregnant Taylor was very worried about being a good mom so she read many parenting books, saw her physician regularly and completed extensive parent training with her husband. All of her friends and family describe Taylor as an excellent parent. However during the first few days at home with her newborn son Taylor experienced an unwanted image of herself shaking her baby when he was crying. This image was extremely upsetting even though she did not harm him in any way. Since that time she has tried to suppress any negative thoughts about her baby but the more she tries to keep these thoughts away the more they

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intrude into her mind (e.g., "what if I shake the baby?" or "what if I throw or hit the baby?"). After seeing a newspaper article about child sexual abuse during the past month she has also started to have obsessions such as "what if I am a child molester?" or "what if I sexually abuse my baby?" even though she has no desire or intent to abuse her child. These obsessions are especially bad when she is changing and bathing her newborn son. Sometimes she is able to dismiss her obsessions as just thoughts but other times she wonders if the obsessions mean something is seriously wrong with her mind or moral character. As a result of her obsessions Taylor is having difficulty being alone with her son. However she is terrified to tell anyone about her symptoms as she is ashamed and afraid her baby will be taken away from her. She is beginning to insist that her husband work at home whenever possible and she is thinking about asking if her mother could move in with them even though they don't really have room. If family or friends can't be with her she will often go to the park or the local shops so she is not home alone with her child. Taylor will not go out onto her balcony or any high places with her son even with another adult as she is afraid she will have the urge to throw him over the edge. Whenever she has an obsession she tries to push them away and repeats the phrase "these are not my true thoughts" in her mind over and over until her anxiety feels manageable again. She is worried that if she just lets the obsessions come and go that she may lose control and hurt her son even though she is an excellent mother and has always put the safety and well-being of her child first. Taylor feels devastated that these obsessions are ruining her ability to enjoy parenting her son. Combined with the normal challenges of parenting her symptoms are creating exhaustion and sleep disturbance. She is also worried that she may not be able to handle having another child even though she has always planned to have several children and resigned her job to be a full time homemaker and parent.

Cole is a 44 year old man who lives with his wife and their two teenage children. Cole has experienced obsessions and compulsions around both checking and ordering/arranging for as long as he can remember. As a child he would place the objects in his bedroom in groups of three and would get so upset at his siblings for moving them that his parents allowed him to place a lock on his door. He would also compulsively check his schoolwork for mistakes and this often interfered with completing exams or homework. Cole was unable to finish grade 12 or attend university for this reason. Due to the interference of his OCD Cole has chosen to work for over 20 years as a maintenance worker at a local hospital even though he always wanted to be a pharmacist. Cole has noticed that his compulsive checking of his work increases when he feels moody or when he has experienced tension or conflict with a family member. He has often been reprimanded for his slow speed at work due to his obsessions about making a mistake and his compulsive checking (e.g., redoing a job to be sure he has completed it properly, going back to a past job site to check that electrical switches are off, completing a job very slowly in order to prevent any mistakes). Without the help of his union he would have lost his job on several occasions and this has created conflict with some of his co-workers. At home he experiences strong urges to arrange objects in set places (e.g., from smallest to largest in straight lines) and will get very upset if his wife, children or their friends touch or move certain objects in the home. As a result his children rarely invite friends home and are spending increasing amounts of time away from the home when Cole is there. This has been very upsetting for him as he cares deeply about his children. His wife has been very understanding but his symptoms have been stressful for her. Cole is unable to send a letter or email without spending substantial time checking it for errors or comments that could be

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misinterpreted by the reader. He will often ask his wife to check these kinds of things for him even if inconvenient for her. Recently he took a trip with his wife to Hawaii, which was very stressful due to his compulsive checking of their luggage and tickets at home, the airport and the hotel. Cole feels as if his OCD has interfered with his ability to reach his full potential and he wonders if he will ever be able to enjoy work or leisure activities without his obsessions or compulsions getting in the way.