

What Are The Causes of Obsessive Compulsive Disorder?

Written by Gary Peterson
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Obsessive compulsive disorder is a type of anxiety disorder. It is characterized by strong urges to do certain things repeatedly. These “things” are called rituals or compulsions by the scientific community. While everyone feels anxiety, fear, uncertainty or worry at some time, people who suffer from obsessive compulsive disorder have no way to “shut off” that anxiety. This results in behaviors and feelings that are taken to extremes.

Much of the time, the anxiety and the compulsive rituals go hand in hand. If a person suffers from anxiety about cleanliness or germs, this may be accompanied by compulsions to wash a lot, clean things, or not touching things that may have germs on them. Obsessive compulsive disorder can be incredibly disrupting for people and make it difficult to live a “normal” life.

Extensive research has been carried out of the past few years aimed at determining the causes of OCD. It is still not clearly understood and more work is being done on it today. One of the theories regarding the cause of OCD is closely tied to the chemical serotonin. serotonin is a chemical found in the brain that allows nerve cells to communicate with each other. Research has determined that serotonin is heavily involved with mood, aggression, sleep, appetite and pain. It appears to be an incredibly flexible and adaptable chemical that affects the brain in many different ways. It is theorized that people with OCD may have serotonin receptors that are under stimulated. This hypothesis is consistent with reports that some OCD patients benefit from select serotonin reuptake inhibitors which are a type of antidepressant medication.

Brain scans of OCD sufferers have also shown that people with this disorder often have abnormalities within the brain. The area of the brain above the eyes, known as the orbital cortex, and deeper structures such as the Basal Ganglia and Thalamus seem to be particularly affected. Research has suggested that when communication between these areas of the brain is not functioning correctly, symptoms of OCD can develop. The deeper parts of the brain do not have any relation to reasoning, only urges and compulsions. If these areas are not communicating with the orbital cortex, the “reasoning part” of the brain correctly, obsessive compulsive disorder is likely to develop.

Another theory related to the cause of OCD is family history. It is not clearly understood if obsessive compulsive disorder is genetic, but there is evidence to suggest that it may be. Generally, people with relatives who have OCD are at a higher risk of developing the disorder. However, most people with the illness have no family history of OCD. As genetic research and knowledge has improved, a specific chromosome/gene variation that doubles the likelihood of a person developing OCD has been found, but is not well understood. There seems to be a difference between OCD developed as a child and the kind that develops as an adult. Some studies suggest that if an individual’s OCD began in adulthood there is less of a chance of this person’s children contracting it.

In addition to serotonin issues and potential family history, some psychiatrists believe that significant life stressors, like being the victim of sexual abuse as a child can increase the chance of developing OCD as an adult. Again, this theory is not well documented or described, but there does seem to be some research that supports it. Guilt and shame seem to be very

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prevalent emotions in people that suffer from OCD and it is thought that particularly stressful events can trigger these feelings in young children. Being the victim of sexual abuse as a child is sometimes the tipping point that causes OCD tendencies as an adult.