

QUICK FACTS:

POSTPARTUM OBSESSIVE COMPULSIVE DISORDER (OCD)

A Look Into OCD

Obsessions defined by: Recurrent and persistent thoughts, urges, or impulses that are intrusive and unwanted and cause marked anxiety or stress. Individual attempts to ignore or suppress thoughts urges or images or to neutralize them with some thought or action

Compulsions defined by: Repetitive behaviors that the individual feels driven to perform in response to the obsession Behaviors or mental acts are aimed at preventing or reducing anxiety or distress.

What Causes Perinatal OCD?

Causes are unknown but theories suggest that some women are susceptible to the drastic changes in hormone levels that occur during pregnancy and the postpartum period, which in turn may influence brain chemical activity. It is also thought that a rapid rise in oxytocin, a hormone that is central to the mother-infant bonding process, may trigger an exaggerated "protective" response in the form of obsessive thoughts and checking rituals. Additionally, psychological factors such as a heightened sense of responsibility and increased perception of threat can lead to the obsessional anxiety that is a hallmark of OCD.

What Happens?

In Perinatal OCD there are intrusive repetitive thoughts-usually of harm coming to the baby. These thoughts are ego-dystonic which means these thoughts, feelings and behaviors are felt to be distressing, unacceptable, or inconsistent with one's self concept.. The thoughts cause a spiral of "what if " thinking, there is tremendous guilt and shame, they are horrified by the thoughts, they are hypervigilance, and mothers then engage in behaviors to avoid harm or minimize triggers.

The common presentations of Perinatal OCD are fear of deliberate harm (41%), contamination/accidental harm (29%), ordering/arranging (6%), religious (3%), and checking (3%).

The gold standard for treatment of OCD is Exposure Response Prevention that specifically targets the source of a person's obsessions by directly exposing them to it. NOCD and International OCD foundation have provider lists for therapists trained in ERP.

OCD vs Psychosis

OCD Parents recognize thoughts/images are unhealthy. Extreme anxiety related to thoughts/images. Overly concerned about "becoming crazy" or "snapping"

Perinatal Psychosis parents may not recognize actions/thoughts are unhealthy, may seem to have less anxiety when indulging in thoughts/behaviors. May have minimal insight about distressing thoughts.

References

Perinatal OCD: What Research Says About Diagnosis and Treatment by Neha Hudepohl, MD, & Margaret Howard, PhD
International OCD foundation <https://iocdf.org>
NOCD Foundation <https://www.treatmyocd.com>