

ME, MYSELF AND OCD

Where do we draw the line between quirky habits and dangerous obsessions? And how much can they take over your life? Extreme sufferer Nick Scott investigates

I CAN VIVIDLY recall the dank mid-November afternoon in the Eighties when, on a sodden London school football field, I realised I had mental issues. The epiphany came, aptly enough, in the form of a blow to the head. Oblivious to the game being played around me, I'd been pacing up and down the halfway line for 20 minutes, eyes fixed on the chalk, mentally weaving some endless mathematical sequence while muttering fawning incantations to the awesome brute in the sky whom I'd yet to discover doesn't exist, when the ball ricocheted off my skull and into touch. As the metallic taste of blood spread over my tongue, incredulous groans and chortles of derision wafted through the drizzle and freezing mist. "Wake up, Scott, you twat."

Yes, it sounds like stark, raving insanity. And, left to its own devices, it becomes exactly that. But obsessive-compulsive disorder (OCD) — the anxiety condition that sees victims trapped in a pattern of repetitive thoughts and behaviours, prompted by involuntary, intrusive thoughts — is a far more common disorder than you may think. The ballpark figure is that OCD affects 2 per cent of the UK population. And it doesn't discriminate according to age, gender, economic status or, perhaps most surprisingly, intellect. One theory suggests it might even be more prevalent among creative and altruistic types.

Given that people tend to suffer in silence for 10 to 12 years before seeking treatment, this number is likely to be far greater. Especially when taking into account those who have experienced bouts of anxiety but think little of it. Ask yourself the following: have you ever experienced



unsettling scenarios — possibly involving catastrophic events and your family — gatecrashing your everyday thoughts? Felt the need to triple-check whether your appliances are turned off and the door is locked before leaving the house? Found yourself fretting, beyond reason, about contamination and infection, or irrationally perturbed by awkward symmetry in the arrangement of household objects?

If any of these has you nodding in recognition, it's likely you've had a brush with OCD. In an age where the verb "to obsess" is in common usage and words such as "perfectionism" and "workaholic" remain everyday parlance, it seems not so much a syndrome for neurotic housewives as the gum disease of mental health: a woefully under-diagnosed condition, which, experts agree, can escalate into something far more problematic.

It was Sigmund Freud who first coined the term "obsessional neurosis" in 1894. More than a century on, there isn't a broad consensus on what causes it, although academics in America are growing in confidence. "Neuroimaging studies show that certain areas of the brain are more active in those with OCD," says Jeff Szymanski, executive director of the International OCD Foundation. "We believe there's a circuit in the brain that's overactive. There's probably a genetic link."

Social conditioning also plays its part. Given the neurosis that dogged me during my own days as a sufferer of what is now a recognised sub-branch of OCD called "scrupulosity" (in which religious guilt is the chief tormentor), it's not surprising to

learn that the darkest fears and anxieties of OCD sufferers tend to reflect cultural trends. "In India and Africa, it's very much centred on devils and witches," says Simon Darnley, a cognitive behavioural therapist at the South London And Maudsley Anxiety Disorders Residential Unit. "When I first got into this discipline 20 years ago, it was HIV. Then E-coli, MRSA, GM foods, mobile phone radiation. Now it's parents becoming convinced they're paedophiles. I've known dads turn up at police stations saying, 'Lock me away, and never let me near my child again.'" As a rule of thumb, whatever life events are most repugnant to you make up the reality that threatens to unfold.

My own delusion, I now realise, was the product of an explosive combination of my religious upbringing and elements of the pop-cultural Zeitgeist of the era. It was a time when late-night TV slots were filled with satanically themed movies — *The Exorcist*, *Race With The Devil*, *The Omen* — and the VCR had just become a household staple. American zealot pastors, inexplicably playing Led Zeppelin records backwards, had just decided they could hear something more sinister than a bustle in the Brummie rockers' hedgerows. In the paranoid world I once inhabited, my involuntary thought processes had transformed the family cat — a benign bundle of ginger fur and lard — into a malevolent rabies carrier with designs on my family's wellbeing. It's typical for OCD sufferers to believe they pose a threat to either themselves, others or both.

Perhaps OCD's oddest trait is that sufferers know their fears and rituals are ludicrous, that the rightful winner is losing a battle between heart and mind. "There are two voices," says Darnley, "and the illogical one is louder because it has the power to induce anxiety, fear, dread and guilt. That's why it wears people down." Woody Allen's outlook on his own mild OCD neatly supports this view. "I know it would be total coincidence if I didn't slice [my breakfast banana] into seven pieces, and my family were killed in a fire," he told *Newsweek*, "I understand that there could be no correlation, but the guilt would be too much for me to bear, so it's easier for me to cut the stupid banana."

Left to their own devices, OCD's nagging impulses invariably intensify. "One person I treated was getting up at 2am to do the cleaning before packing up his car with his TV, hair dryer, iron, microwave — anything that plugged in — so he knew it wasn't left on at home, then

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DISORDERLY CONDUCT

Woody Allen isn't the only high-profile name to have battled with OCD

CAMERON DIAZ

She used to open doors with her elbows, but in 2007 announced: "I think I've made my peace."



DAVID BECKHAM

He has admitted to throwing away cans of Pepsi to ensure there's always an even number in his fridge.



BILLY BOB THORNTON

"The simple [rituals] I can explain to you," he says. "The complex ones, I don't know how to tell anybody."



DONALD TRUMP

The billionaire's fear of germs is thought to have rendered him unwilling to touch lift buttons or shake hands.



LEONARDO DICAPRIO

He has to steel himself to avoid chewing gum stuck to pavements, and fights urges to walk through doorways several times.



driving to work several times," says Darnley.

Those who do seek help will likely be given medication. Serotonin-uptake drugs work for a lot of patients — "not because OCD sufferers are lacking in that chemical, any more than headache sufferers are lacking in aspirin," says Darnley, "but they seem to file the edge off the anxiety".

An arguably more wholesome and profound method of combatting OCD is cognitive behavioural therapy, where patients actively refrain from performing the compulsive ritual responses to the very impulses that are troubling them. "I've got someone coming in to smash a huge mirror later," says Darnley. "We're going to try and make his mum die with it. With patients having trouble with blasphemous thoughts, we individualise phrases to fit the patient, but one we often get them to repeat is 'God fucks pigs'. It causes a little anxiety, yes, but it's just a bunch of words."

Some with severely debilitating OCD have even opted for neurosurgery, which involves destroying the minuscule amount of brain tissue thought to be overactive in OCD patients. Opinion on the medical and ethical merits of this are polarised. "It has to be a last-resort treatment," says Szymanski, "as we're talking about drilling a hole in people's heads, but we're seeing 50 to 60 per cent of people responding." Darnley isn't convinced.

"If you cut off peoples' arms, you'll also reduce ritualising," he says. "Does that mean amputation should be recommended as a treatment? There is no 'OCD bit' of the brain that can be removed, it's much more complicated than that."

I never graduated beyond the Coca-Cola Championship of severe mental anxiety. I came of age, went to university and, helped by antidepressants, held down a course despite massive OCD spikes, exacerbated by dope, a hungry appetite for gothic fiction and the occasional God squadder telling me my mental gremlins were sent by Lucifer. Then, as an adult, I became more willing and able to tackle the intrusive thoughts. Now aged 36, OCD is but an easily ignored nag in a distant cranny of my psyche. So I'm fine. Aren't I?

"You've gone for the non-OCD way: to not do the rituals but still have the thoughts," says Darnley. "That's OK, but not ideal. The best option is the anti-OCD way. You've got to keep on doing the opposite of what they tell you." You want me to taunt those distant, mildly irksome whispers with their own contrary impudence? "That's right. You have to keep up the fight: that's 100 per cent recovery."