

Relationships between anger, symptoms, and cognitive factors in OCD checkers

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Abstract

The purpose of this study was to examine whether individuals diagnosed with obsessive–compulsive disorder (OCD) with primary checking compulsions report higher levels of trait anger and anger expression compared with a student control group, and whether trait anger and anger expression are correlated with specific beliefs and interpretations that are common among individuals who compulsively check. A group of individuals with OCD reporting significant checking compulsions ($n = 33$) and a group of undergraduate students ($n = 143$) completed a questionnaire package that included measures of trait anger and anger expression, as well as measures of obsessive–compulsive symptoms and beliefs. The compulsive checking group reported greater trait anger, though not greater anger expression, than the student control group. Furthermore, beliefs concerning perfectionism and intolerance of uncertainty were positively correlated with anger expression and trait anger among compulsive checkers but not among the student control group. The implications of these findings are discussed in terms of cognitive–behavioural treatments for and models of compulsive checking in OCD.

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Anger in OCD: the role of beliefs in compulsive checking

Although obsessive–compulsive disorder (OCD) is currently classified as an anxiety disorder (APA, 2000), there has been much recent interest in research on the experience of other emotions associated with OCD such as disgust (Berle & Phillips, 2006; Mancini, Gagnani, & D'Olimpio, 2001; Rachman, 2004) and shame/guilt (Mancini & Gangemi, 2004; Rachman, 1993; Shafran, Watkins, & Charman, 1996). We sought to build upon recent work on anger in OCD (Whiteside & Abramowitz, 2004, 2005) as it applies to those who engage in compulsive checking behaviour. We chose this particular symptom of OCD as a focus for this work on anger for a number of different reasons. A 36-year-old married female with OCD, characterized primarily by checking compulsions and aggressive obsessions, said during a therapy session,

I hope you don't take this the wrong way, but I'm worried that I might be full of rage. I get so angry sometimes because I have to keep repeating and checking things; but then I worry that maybe the anger

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makes me dangerous so I try to shut it down. I'd never do anything harmful to anyone, but sometimes my anger and frustration make me wonder about how safe a person I might be. These emotions sometimes make me think that I'm really a dangerous person and I know that if I could stop checking so much, I wouldn't be so angry and maybe I wouldn't worry so much about this anger getting out of control.

This quote suggests that this patient's feelings of anger and rage are intimately linked to her compulsive checking, and it is typical of the anger and frustration sometimes expressed by individuals with checking compulsions in therapy. Consistent with clinical observations, several studies have noted that individuals with both clinical and subclinical levels of OCD report elevated levels of anger compared with individuals without an anxiety disorder (Rubenstein, Altemus, Pigott, Hess, & Murphy, 1995; Spinella, 2005; Whiteside & Abramowitz, 2005). Relative to other manifestations of OCD, compulsive checking—characterized by doubts and repetitive attempts to verify whether an action has been completed properly—may be associated with greater anger (Rachman & Hodgson, 1980). Rachman and Hodgson suggested that checkers may report higher levels of anger due to the frustration that their doubts are rarely resolved by checking. In other words, because the act of checking rarely results in clear confirmation that harm has been prevented, an individual may experience increased frustration at having to check over time. There are a number of characteristics and beliefs prevalent in OCD, such as intolerance of uncertainty and perfectionism, which may influence doubt and the ability of those who compulsively check to verify whether something has been done properly (OCCWG, 1997). These may well be related to increased anger, as these beliefs are frequently elevated in individuals with OCD (OCCWG, 1997, 2005).

Not only might individuals with compulsive checking in particular experience more anger than individuals without OCD, it may also be the case that they express anger differently from other individuals with OCD (Rachman, 1993; Whiteside & Abramowitz, 2004). Rachman (1993) suggested that the difficulty individuals with OCD have in expressing their anger may stem from the fact that they feel excessively responsible for the prevention of harm. This inflated sense of responsibility has been associated with a number of different forms of OCD (Salkovskis, 1985), but is often most strongly related to compulsive checking (e.g., Lopatka & Rachman, 1995). Rachman (1993) suggested that such excessive responsibility may lead individuals with OCD to express anger internally rather than externally. Recent research also suggests that individuals with OCD not only feel more responsible to prevent harm, but may also believe that other people are less responsible than they are for preventing harm (Ashbaugh, Gelfand, & Radomsky, 2006). Believing that other people are irresponsible *and* that one must take full responsibility to prevent harm may further contribute to feelings of anger. This is also consistent with clinical observations. For example, a 21-year-old female with primarily checking compulsions stated in therapy, “I get very angry at people when they try to make me hurry; all of my checking takes time and people [who do not check] don't seem to understand it.”

Two recent studies have examined whether individuals with OCD express anger differently compared with individuals without OCD. Whiteside and Abramowitz (2004) found that individuals with subclinical symptoms of OCD report greater anger expression, as assessed by the Spielberger State Trait Anger Expression Inventory (STAXI; Spielberger, 1988), compared with individuals without symptoms of OCD. However, this greater anger expression was not due to their greater *outward* expression of anger, such as verbal or physical aggression; rather, it was due to greater control of anger and inner expression (or suppression) of anger. Additionally, Whiteside and Abramowitz found that the OCD symptoms of washing, checking, and doubting were those most strongly related to anger expression and control. However, after controlling for symptoms of depression, many of these relationships between anger expression and OCD disappeared, though the correlations between anger expression and anger control and checking did remain significant. This last finding complicated matters, as it was therefore unclear whether anger control and the inner expression (suppression) of anger were related to OCD or to depressive symptomatology.

In a follow-up study, using a sample of individuals diagnosed with OCD, Whiteside and Abramowitz (2005) did not find that the STAXI measures of anger expression were elevated relative to a community control group or relative to the normative data reported by Spielberger (1988), though measures of trait anger were significantly higher in the clinical group. Correlations between OCD symptoms and anger expression revealed no relationship between compulsive checking and anger expression. The authors (Whiteside & Abramowitz, 2005) also examined whether thought–action fusion (TAF), defined as the beliefs that having a negative

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