



## OBSESSIVE–COMPULSIVE SYMPTOMS AND SUPPRESSION OF PERSONALLY RELEVANT UNWANTED THOUGHTS

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**Summary**—Consequences of thought suppression were compared in people characterized by different levels of obsessive–compulsive symptoms. Eighty-five female students were asked to retrieve an uncomfortable thought. Then they were instructed either to think about anything they liked or to do the same with the exception that they were not to think about the uncomfortable thought. The subjects subsequently wrote down their stream of thought. Then all subjects were asked to think without any limitation for a second period. There was a significant interaction between obsessive–compulsive symptoms measured with the Maudsley Obsession–Compulsion Inventory and initial instruction, with regard to the occurrence of the uncomfortable thought during the first period, for two out of three measures. Alternative explanations of the results are discussed.

The large majority of people report that they have intrusive thoughts and use effortful strategies to avoid them (Freeston, Ladouceur, Thibodeau & Gagnon, 1991). An important strategy is the suppression of unwanted thoughts. Wegner recently initiated an original approach to thought suppression (Wegner, Carter, White & Schneider, 1987). He demonstrated that the suppression of innocuous thoughts may lead to an exacerbation of such thoughts. This has recently been discussed by Wegner in terms of what he calls an ironic process (Wegner, 1994). By ironic process Wegner means an automatic process that checks if a mental target that one consciously tries to avoid is in fact being avoided, but that, at the same time, the check serves as a reminder of the target.

Thought suppression has been found to have two interesting consequences: initial enhancement of the suppressed thought and rebound. Initial enhancement refers to the paradoxical effect that thought suppression may increase rather than decrease the frequency of target thoughts. Rebound is an increase in thoughts about a target, when suppression instructions are annulled. Initial enhancement and rebound have, however, not been reliably observed in previous research (Clark, Winton & Thynn, 1993; Merckelbach, Muris, van den Hout & deJong, 1991; Muris, Merckelbach, van den Hout & de Jong 1992; Salkovskis & Campell 1994).

Research on experimentally induced suppression promises to increase our understanding of disorders involving persistent intrusive thoughts. Above all it seems relevant to obsessive–compulsive disorders where the person is disturbed by thoughts that he also considers unreasonable. It is thus appropriate to study the behaviour of people high on obsessive–compulsive symptoms in a thought suppression paradigm. People high on obsessive–compulsive symptoms might be expected to try harder to suppress unwanted thoughts and to show rebound, and/or initial enhancement as a consequence.

In thought suppression research, suppressed thoughts have generally been ostensibly innocuous. However, intrusive thoughts in psychological disorders, such as obsession–compulsion, generally are upsetting, at least to the afflicted person. If the phenomena observed in the paradigm are viable as a model for such disorders, they should occur when emotional material is suppressed. Some studies, however, have failed to find evidence for this when emotional material is used in contrast to non-emotional material (Muris *et al.*, 1992; Smári, Sigurjónsdóttir & Sæmundsdóttir, 1994). The reason for this is not clear. Perhaps people are less motivated to suppress emotional material because it is more acceptable not to be able to do so. The relevant factor in this context may rather be whether or not the thoughts are personally relevant. But Kelly and Kahn's (1994) study indicates that at least rebound does not occur as a consequence of suppression of personally relevant thoughts. The central issue is, however, whether or not these phenomena appear with personally relevant thoughts in people characterized by obsessive–compulsive symptoms.

In the present study we address the moderating role of obsessive–compulsive symptoms in the thought suppression paradigm. We hypothesize an interaction between instructions (suppression–control) and the level of obsessive–compulsive symptoms with regard to the frequency of personally relevant, unwanted thoughts. We expect, in a first period, people characterized by obsessive–compulsive symptoms to show initial enhancement when they try to suppress unwanted, personally relevant thoughts, to a greater extent than people less so characterized. For rebound the expectations are less clear, but we tentatively include a second control period for all subjects, for exploratory purposes.

## METHOD

### *Subjects*

Eighty-five female students of education, psychology and music served as *Ss* in this study. Their age varied between 19 and 39 years ( $m = 23.99$ ,  $SD = 4.17$ ).

### *Procedure*

The study was presented to *Ss* as relating to different kinds of thoughts and feelings. They were asked to fill in three different inventories, one of which was the Icelandic translation (Smári, Bjarnason & Thorleifsson, 1994) of the Maudsley Obsessive–Compulsive Inventory (MOCI) (Rachman & Hodgson, 1980). After filling in the inventories, they were asked to retrieve a thought that bothered them in daily life, write a description of this thought on a piece of paper, and then tear it up.

The *Ss* were given randomly either a suppression or a control instruction. In the suppression instruction they were asked to write down on sheets of paper their stream of thought for a few minutes. They were told to think about anything they liked with one exception; they were not to think about the thought they had just written down. Anytime that thought occurred to them, they were to mark an X at the right margin of the sheets. The number of these marks was used as a measure of current target thoughts. A similar measure is used by Wenzlaff, Wegner and Roper (1988). The control instruction was exactly the same, apart from that the *Ss* were told they could think about anything they liked, including the thought they had written down previously.

After a period of 5 min all the *Ss* were given a control instruction and told to write their thoughts as before. After a second period of 5 min the *Ss* turned to a booklet with a series of questions relevant to their behaviour during the two periods. First came a set of questions related to the first, and then a set of questions related to the second period.

On the first measure the *Ss* rated on a 7-point scale, from 1 = not at all to 7 = very much, how much they had tried not to think about the target thought during the period. This measure also served as a manipulation check as to how well the *Ss* had understood and tried to follow the initial instructions.

Then there were two measures of the frequency of occurrence of the target thoughts during the period. The first measure was a rating on a 7-point scale, of how much the *S* had thought about the target thought, from 1 = not at all to 7 = constantly. The second measure was a rating of the percentage of thinking time devoted to target thoughts, on a scale from 0 to 100%. These are, together with the X marks, supposed to reflect the frequency of occurrence of the target thoughts.

Also the *Ss* rated, on two different 7-point scales: (a) how much control of their thoughts they had experienced during the period: and (b) how much control they estimated they should have had over their thoughts during the period.

Finally, in order to assess other potentially relevant characteristics of the target thoughts, *Ss* were asked to rate also on two 7-point Likert scales how much the thought used to disturb them in daily life, and how often the thought used to occur in daily life.

## RESULTS

### *Obsessive–compulsive symptoms*

The mean and standard deviation on the Maudsley Obsessive–Compulsive Inventory (MOCI) were 7.82 and 4.27, respectively. *Ss* were divided into those high and low on obsessive–compulsive symptoms based on whether their scores were below or above the median. The median value was 7

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