

Communicating Research in Clear Language

Assessment of Studies of Non-medication Treatment of OCD

What is the research about?

Treatment recommendations are only as good as the evidence on which they are based. That is why professional associations review research studies to evaluate how well they have been conducted and analyzed. This is an update of a review published in 2007 that looked at the evidence base for different forms of psychosocial interventions used in children and youth with OCD. That review concluded that the best evidence was for Cognitive Behavioural Therapy (CBT). CBT is a form of therapy, offered individually or in groups, that teaches people how to identify and alter thinking patterns that can worsen their symptoms and reduce their ability to function in daily life.

What did the researchers do?

By repeating the 2007 review literature search for their update, the authors located studies on psychosocial intervention in children and youth with a firm diagnosis of OCD. They then categorized the studies according to the strength of their research methods.

What did the researchers find?

This review again found good evidence for the effectiveness of family-based group CBT, non-family-based CBT, individual CBT, and also for a new category, technology-based CBT, in which the treatment is delivered over the phone or online. However, many studies lacked a control group, had only a small number of participants, did not adequately describe the participants or the content of the therapy, reducing the strength of evidence for their effectiveness. Larger studies are required to understand why and how it works and for what kinds of OCD symptoms.

Take home message

There is limited high quality research on the use of CBT in OCD, but existing studies show that it likely does work well in children with OCD. Larger, better designed studies should be carried out to verify which types of CBT are the most useful and to identify the "active ingredients" of CBT.

NOTE: The original <u>Research Report</u> was written by J. Freeman and associates at the Alpert Medical School of Brown University and published in the Journal of Clinical Child & Adolescent Psychology in 2014.