

SCHIZOPHRENIA Factsheet

March 2022

What is obsessive-compulsive disorder?

Obsessive-compulsive disorder (OCD) involves persistent and intrusive thoughts (obsessions) and repetitive actions (compulsions). The DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition) defines obsessions as recurrent and persistent thoughts, urges, or impulses that are experienced as intrusive and unwanted with associated anxiety or distress. The individual attempts to suppress these obsessions by performing compulsions; repetitive behaviours (e.g., hand washing, ordering, checking) or thoughts (e.g., praying, counting, repeating words). The obsessions or compulsions are time-consuming and can cause significant impairment in social, occupational, or other areas of functioning.

Related disorders include hoarding disorder, excoriation disorder (skin-picking), body dysmorphic disorder (obsessive focus on a perceived flaw in appearance) and trichotillomania (hair-pulling).

What is the evidence for OCD in people with schizophrenia?

Moderate to high quality evidence suggests the prevalence of OCD in people with schizophrenia is around 13.6% and the prevalence of OCD symptoms is around 30.3%. Rates are higher in outpatients than in inpatients (17% vs. 11%), and in people with chronic schizophrenia than in people with first-episode psychosis (13% vs. 0.8%).

Moderate to high quality evidence shows that people with schizophrenia and obsessive-compulsive symptoms, but not a diagnosis of OCD, have more severe symptoms of schizophrenia than people with schizophrenia without obsessive-compulsive symptoms.

Moderate to high quality evidence found no differences in cognition between people with schizophrenia and OCD and people with schizophrenia without OCD.



NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about schizophrenia or its treatment with your doctor or other health care provider.

For more information see the technical table

HOW YOUR SUPPORT HELPS

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