Biological Treatments for OCD

**Drug Therapy for OCD** - based on the notion that anxiety is caused by an imbalance of neurotransmitters in the brain. They work by manipulating levels of these neurotransmitters. For OCD, this is serotonin. Can also use exposure therapy (similar to treatments of phobia)

**Most drugs work by interfering with events at the synapse:**
1) Neurons release neurotransmitter into synaptic cleft
2) Neurotransmitter binds to receptors and activates them
3) Enzymes (monoamine oxidase) are released to break down the excess neurotransmitter
4) Excess neurotransmitter is taken up by the presynaptic neuron
5) Neurons are replenished with new and reused neurotransmitter

**SSRIs - Selective Serotonin Reuptake Inhibitors**
- Inhibit steps 4 and 5 and encourage serotonin to be absorbed by the receiving neuron instead of the presynaptic neuron
- This means that serotonin stays in the synapse longer and increases the amount of serotonin being absorbed by the receptors.

**MAOIs - Monoamine Oxidase Inhibitors**
- Prevent the enzyme from being released so the excess serotonin is not broken down
- These aren’t used often due to dangerous side effects. They tend to be a last resort - used only in extreme cases.

**Evaluation of Treatments:**
- Drug therapy is cheaper and quicker than psychological treatments
- Less disruptive to everyday life than psychotherapy as the patient doesn’t have to attend therapy sessions
- SSRIs can cause side effects such as sexual dysfunction and nausea
- Drugs only treat the symptoms and not the cause so once you stop taking them, the problem will persist
- SSRIs have been shown to be very effective in treating OCD (Soomro et al)