Impact of COVID-19 on obsessive–compulsive disorder: A case series

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ABSTRACT

A public health emergency of international concern, novel coronavirus disease (COVID-19), began in Wuhan, China, in December 2019. Since then, it has been caused a pandemic along with serious mental health problems. No other disorder is more vulnerable to the current situation than obsessive–compulsive disorder (OCD). Our case series focuses on the effects of COVID-19 on OCD along with its various manifestations. Most of our patients had exacerbated symptoms during the current situation, but there were also new onset OCD cases triggered by a variety of stressors.

Keywords: Anxiety disorder, COVID-19, obsessive–compulsive disorder

The COVID-19 pandemic has created a great deal of anxiety for many individuals. Recommendations to address pandemic-related mental health issues have emphasized the needs of vulnerable group. The spread of fear, anxiety, and even panic due to the COVID-19 pandemic can lead to a worsening of preexisting psychiatric disorders.\[1-3\] Despite the 1%–3% prevalence of obsessive–compulsive disorder (OCD) in the general population,\[4\] there have been no specific studies reporting the rise of OCD during the times of pandemic. We present a series of seven cases of various presentations of OCD of which three are exacerbation of known cases of OCD, three new onset, and a known case of anxiety disorder presenting with symptoms of OCD [Table 1].

Case 1
A 38-year-old female, a known case of OCD, for 2 years, was maintaining near-total improvement. A couple of days after her neighbor tested positive for COVID-19, she started developing obsessive thoughts and fear that she might contract the virus too and presented to outpatient department (OPD) with complaints of irritability, apprehension, palpitations, persistent low mood, obsessive thoughts of contracting coronavirus, washing hands thirty to forty times a day, and taking bath five to six times a day. She would force her family members not to go outside.

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to go out of the house because of which she had severe interpersonal issues with her husband. She was started on capsules fluoxetine 20 mg which was gradually up titrated to 80 mg/day. COVID test was done on her, which was negative. Exposure and response prevention therapy with necessary relaxation techniques was also started. Tablet propranolol 20 mg was started to treat her palpitations. The patient showed significant improvement on Y-BOCS scale after 4 weeks of treatment.

Case 2
A 40-year-old male, works as a labor contractor, who is a known case of OCD, maintaining well for 5 years, was off medications for 4 months, due to nonavailability of medications due to lockdown. He presented with complaints of excessive fear to go out of the home with a suspicion that he might contract COVID-19, he also had ruminating worrying thoughts that his family members would get affected with the same. He started developing low mood and his sleep and appetite were drastically reduced. He was restarted on capsule fluoxetine, with regular follow-ups, and showed significant improvement in his symptoms.

Case 3
A 38-year-old male patient, who is a known case of OCD, had obsessive thoughts about order and symmetry of things and a compulsion to place them in order. He was on capsule fluoxetine 20 mg per day. After the pandemic, he started developing obsessive thoughts of contamination and would spend hours washing hands, which was extremely distressing for him. He also developed an obsessive fear of touching surfaces, and would clean them multiple times after someone touched them. His fluoxetine was up titrated to 60 mg, and the patient is on follow-up with significant improvement in symptoms.

Case 4
A 20-year-old female, a first-year BCom student, would constantly keep reading and watching videos of information regarding COVID-19 on social media almost all day. She then started to develop apprehension that she might contract the virus as it is so common. The thoughts grew progressively. These thoughts were very distressing to her and she would have frequent crying, and episodes of panic associated with feeling of impending doom. She would have autonomic arousal in the form of increased heart rate and sweating while watching the news. She became hopeless as her thoughts about contracting the virus would not stop. She was brought to the OPD, with the above complaints, and was started on capsule fluoxetine along with exposure and response prevention therapy, with gradual improvement in her symptoms.

Case 5
A 24-year-old female patient, studied till MSc., developed fever, cold, and cough, during which time she had excessive worrying thoughts that she contracted COVID. Her tests for the same were negative, post which she was still suspicious that she has the infection and gradually these thoughts became obsessive and she started having apprehension and palpitations, multiple times in a day. She had sleep disturbances and frequent headaches. The patient improved on capsule fluoxetine 40 mg and tablet pregabalin 75 mg/day.

Table 1: Influence of COVID-19 on obsessive-compulsive disorder along with its various presentation

| Age | Sex | Occupation                  | Influence of the pandemic                                      | Presentation                                                                 |
|-----|-----|-----------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------|
| 38  | Female | Accountant                 | Fear of contamination from the neighbors                       | Washing hands, 30-40 times per day, apprehension, low mood, panic attacks interpersonal issues |
| 42  | Male | Labor contractor            | Un availability of medications due to lockdown                 | Obsessive thoughts of contamination, fear of going outside of the home, low mood, reduced sleep, and appetite |
| 18  | Male | Clerk                       | Known case of OCD for symmetry and order, started to develop obsessive thoughts of contamination | Fear to touch surfaces, spending hours together washing hands |
| 24  | Female | Student                     | New-onset OCD due to excessive information from media about the pandemic | Apprehension, autonomic arousal, panic attacks, crying spells, obsessive thoughts |
| 42  | Female | Homemaker                  | Developed fever and tested negative but she still had obsessive fear that she might have the infection | Apprehension, palpitations, obsessive thoughts, headaches, and reduced sleep |
| 52  | Female | Homemaker                  | Known case of type II diabetes mellitus, after she developed a sore throat, became excessively apprehensive that she has COVID-19 because of her risk factor in spite of being tested negative | Low mood, obsessive thoughts of contamination, checking her SpO2 and temperature multiple times of day, delayed onset sleep, reduced appetite, and difficulty in concentrating at work |
| 42  | Male | Deputy manager at multinational bank | Known case of anxiety disorder, who lost a niece due to cardiac arrest, became excessively apprehensive that he will lose all his loved ones because of COVID-19 | Low mood, hopelessness, apprehension, reduced concentration at work, difficulty to get out of the car |

OCD – Obsessive-compulsive disorder
Case 6
A 52-year-old female patient, who is a known case of type two diabetes mellitus on oral hypoglycemics for 10 years, presented to OPD with fear of death due to COVID-19, as she heard that diabetes is a risk factor for contracting COVID; one day, she developed severe discomfort, she was apprehensive that she contracted the infection, and would check her temperature and saturation on pulse oximeter multiple times in a day. She was preoccupied with worrying thoughts of having COVID-19 along with low mood and delayed onset sleep. She was started on capsule fluoxetine 20 mg daily and along with relaxation techniques like JPMR, showed significant improvement in symptoms.

Case 7
A 40-year-old male patient, who works as a deputy manager at a multinational company, presented to OPD with symptoms of reduced sleep, obsessive doubts about contaminating the virus, repeated acts of handwashing, fear of losing loved ones, and reduced concentration at work. He has a history of anxiety disorder after his niece passed away following acute myocardial infarction, which makes him feel he will lose his other loved ones due to the current pandemic. He would end up not opening car doors as he is scared of getting infected. Repeated reassure from his family members would not help him. He was brought to the OPD, was started on capsule fluoxetine 20 mg per day, and was gradually up titrated.

DISCUSSION

The above case series summarizes the various presentations of OCD during COVID-19 pandemic, known cases of OCD had exacerbated symptoms and needed increased doses of SSRIs, there were new-onset OCD cases due to various stressors along with the pandemic like being a patient of diabetes mellitus, a family member, or a neighbor being affected with COVID-19, and we also saw new-onset OCD in patients of other psychiatric disorders such as generalized anxiety disorder. Most patients responded to combined approach of medication with fluoxetine and CBT in the form of exposure and response prevention therapy. Our results are similar to an earlier study, which concluded that they witnessed an increase in OCD symptoms by 71.8%. This worsening was more significant among “washers” compared to “nonwashers.” Our results are also similar to another study which concluded that this stressful period is associated with a significant symptom worsening, particularly among the patients with contamination symptoms and a remission state before the quarantine.

Declaration of patient consent
The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest
There are no conflicts of interest.

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