

## Hoarding Disorder

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## A New Syndrome?

- Not included in the DSM-IV
- Hoarding symptoms are listed under OCPD
  - “Inability to discard worn-out or worthless objects even when they have no sentimental value”
- Not listed at all in ICD-10

Mataix-Cols et al. (2010)

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## Operational Definition

- A. Persistent difficulty discarding or parting with possessions, regardless of the value others may attribute to these possessions
- B. This difficulty is due to strong urges to save items and/or distress associated with discarding

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### Operational Definition

- C. The symptoms result in the accumulation of a large number of possessions that fill up and clutter active living areas of the home or workplace to the extent that their intended use is no longer possible. If all living areas are uncluttered, it is only because of the interventions of third parties (e.g., family members, cleaners, authorities).

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### Operational Definition

- D. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for self and others)
- E. The hoarding symptoms are not due to a GMC
- F. The hoarding symptoms are not restricted to the symptoms of another mental disorder

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### Hoarding Specifiers

- *With Excessive Acquisition*: If symptoms are accompanied by excessive collecting or buying or stealing of items that are not needed or for which there is no available space.
- *Good or fair insight*: Recognizes that hoarding-related beliefs and behaviors are problematic.
- *Poor insight*: Mostly convinced that hoarding-related beliefs and are not problematic despite evidence to the contrary.
- *Absent insight*: Completely convinced that hoarding-related beliefs and behaviors are not problematic despite evidence to the contrary.

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### Hoarding and OCD

- Hoarding symptoms seen in 18-40% of OCD cases; only clinically significant in < 5%
- Resemble each other phenomenologically
- Comorbid rates of OCD in 16-35% of compulsive hoarders

Mataix-Cols et al. (2010)

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### Hoarding vs. OCD

- In hoarding, don't see distressing, repetitive, intrusive thoughts (obsessions)
- Thoughts of possession do not trigger rituals
- When confronted with discarding, anger and grief are as likely as anxiety

Mataix-Cols et al. (2010)

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### Hoarding vs. OCD

- Continually worsening pattern of symptoms, with late onset of distress/disability
- Lack of insight compared to OCD
- Acquiring and saving are often *pleasant* events, where O/C are always *negative*

Mataix-Cols et al. (2010)

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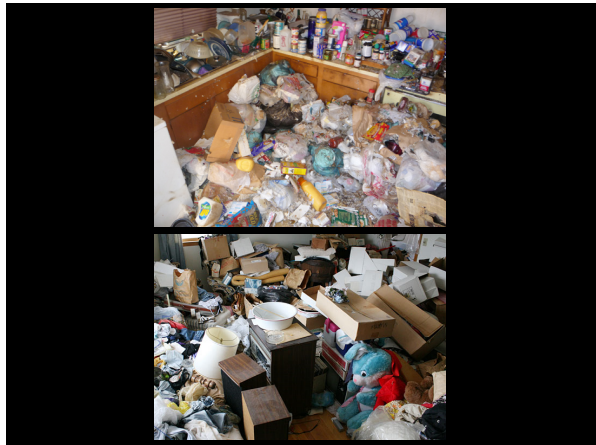
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## Hoarding vs. Squalor

- “Diogenes syndrome” associated with self-neglect and domestic-neglect
- Most with HD do *not* show this, may be a subset of individuals
  - 17% hoarders, 32% residences “extremely filthy”

Sketekee et al. (2001)



## Animal Hoarding

- Large number of animals and
  1. Failure to provide minimal standards of nutrition, sanitation, and veterinary care
  2. Failure to act on the deteriorating condition of the animals and the environment
  3. Lack of awareness of the negative effects of the collection on their own health and well-being and on that of other family members

Patronek & Nathanson (2009)

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## Animal Hoarding

- May be more related to Diogenes syndrome than compulsive hoarding
  - Squalor, neglect of self
- Much more research needed

Patronek & Nathanson (2009)

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## Prevalence

- 2-5% of general population
- Often only diagnosed later in middle to late adulthood (50+ years)
- 60%+ engage in excessive buying, over 50% in acquiring free things

et al. (2010)

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## Prevalence

- Differing studies using different methods have found quite different rates

Table 1  
Epidemiological studies on hoarding.

Study	Instrument	Sample size	Prevalence (%)	Comments
Ruscio et al. (2008)	CIDI 3.0 (1 hoarding item)	2,073	1.4 (lifetime)	National Comorbidity Survey Replication (NCS-R)
Sarniak et al. (2008)	Hoarding criterion for obsessive-compulsive personality disorder	742	4 (lifetime) 5.3 (weighted)	Hopkins Epidemiology of Personality Disorder Study
Mueller et al. (2009)	German version of the Savings Inventory-Revised (self-report)	2,307	4.6 (point)	Representative sample of the German general population
Iervolino et al. (2009)	Hoarding Rating Scale-Self Report (HRS-SR)	5,022	2.3 (point)	Twin pairs from the UK Adult Twin Register (TwinsUK)
Fullana et al. (in press)	CIDI 3.0 (1 hoarding item)*	2,804	2.6 (lifetime) 2.0 in individuals with no mental disorders (n=1,285)	European Study of the Epidemiology of Mental Disorders (ESEMED)

Abbreviations: CIDI (World Mental Health Composite International Diagnostic Interview). \*The wording of the questions related to OC symptoms in the NCS-R and ESEMED studies were identical except for hoarding. Participants in the NCS-R were asked about "A compulsion to save things or being unable to throw things away that you no longer need", i.e., both hoarding obsessions and compulsions were assessed. In the ESEMED study only hoarding compulsions were assessed ("A compulsion to save things or hoard things").

Pertusa et al. (2010)

## Course

- Retrospective reports of first symptoms in adolescence, first interference in mid-30s
- Chronic and unremitting course for vast majority of patients

Mataix-Cols et al. (2010)

## Gender Differences

- Clinical samples are predominately female
- Epidemiological studies are mixed, with two finding higher males rates
- Similar phenomenology across genders

Mataix-Cols et al. (2010)

### SES & Cultural Differences

- Appears to be a universal phenomenon
- Eastern and Western hoarders are quite similar across
  - Clinical characteristics
  - Items being hoarded
  - Extent of clutter

Mataix-Cols et al. (2010)

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### Comorbidity

- High overlap with MDD (57%), SAD (29%), and GAD (28%)
- Less than 20% have comorbid OCD

Frost et al. (2006)

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### Impact of Hoarding

- Associated with substantial distress/disability
- Clutter prevents normal use of space to accomplish basic activities (cooking, cleaning, moving, sleeping)
- Puts people at risk for fire, falling, poor sanitation, and health risks

Mataix-Cols et al. (2010)

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### Impact of Hoarding

- Work impairment greater than all other anxiety, mood, and substance use disorders
- 8-12% evicted or threatened during life
- Often leads to family and neighbor conflict

Mataix-Cols et al. (2010)

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### Let's Watch Some

- <https://youtu.be/NKKYuPLDWKA>
- While we watch, think about what we've talked about in class
- Is the depiction accurate? Is the treatment accurate? Likely to help?

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### Etiology

- High incidence of "pack rats" in first degree relatives of hoarders
- Hoarding in OCD shows higher than expected family rates of hoarders
- Genetic factors account for about 50% of variance in hoarding behaviors

Mataix-Cols et al. (2010)

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### Etiology

- In animal studies, implication of subcortical limbic structures and the ventro-medial prefrontal cortex
- Some evidence from lesion studies in humans implicating anterior ventromedial prefrontal and cingulate cortices

Mataix-Cols et al. (2010)

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### Etiology

- Saving and acquiring behaviors are often positively reinforced in compulsive hoarding by positive feelings
- Feelings of pleasure, safety, and comfort are provided by acquiring new items or fantasizing about existing ones

Mataix-Cols et al. (2010)

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### Meet the “Bad Guys”

- “It’s just not my priority” (low motivation to change)
- Overthinking and confusing one’s self
- Avoidance and making excuses
- Prioritizing short-term reinforcement

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### Meet the “Bad Guys”

- Unhelpful beliefs that get in the way
  - Seeing useless objects as useful or needed
  - Perfectionism & fear of making mistakes
  - Exaggerated sense of responsibility
  - Attachment and anthropomorphizing objects
  - Seeing objects as part of your identity
  - Underestimating their memory
  - Seeing hoarding as being under their control

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### Etiology

- Avoid discarding possessions and end up storing them as a way to avoid
  - The experience of loss
  - Having to make an anxiety-provoking decision
  - Making a mistake regarding a possession
- Clutter is a function of both volume of things and organization deficits

Pertusa et al. (2010)

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### Treatment

- Given the newness of this area of research, limited number of outcome studies
- SRI effectiveness in OCD patients with hoarding is mixed (some less, some equal)
- One study used paroxetine and found a 25% decrease in hoarding symptoms

Pertusa et al. (2010)

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## Treatment

- Poor insight may cause treatment refusal, lack of cooperation, dropout, and poor outcomes
- A specifically developed CBT treatment has shown some promise, with decreases of 23-37% and 70% response rate

Pertusa et al. (2010)

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## CBT for Hoarding

- Includes office and in-home sessions
- Focuses on
  - Motivational interviewing
  - Skills training (organizing, decision making, problem solving)
  - Exposure to sorting, discarding, and not acquiring
  - Cognitive restructuring

Sketekee & Frost (2008)

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## Cognitive Therapy

- Used because hoarding involves false perceptions of threat and worrisome reactions predicting negative future events
1. Identify how the patient is thinking and the beliefs about self, world, and future that underlie those thoughts
    - The “bad guys” we discussed!

Borkovec et al. (2004)

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### Cognitive Therapy

2. Evaluate the accuracy of those cognitions through examination of their logic, probability, and past evidence
3. Generate alternative, more accurate interpretations, predictions, and ways of believing

Borkovec et al. (2004)

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### Cognitive Therapy

4. Use these new perspectives whenever worry is detected and engage in deliberate behavioral experiments
- Can also use a “Worry Outcome Diary” to assist in gathering evidence for/against
    - Allows one to track whether or not the feared outcome actually happened

Borkovec et al. (2004)

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### Challenging Thoughts

- Can I say that this statement is 100% true, without any exceptions?
- What is the likelihood or probability of this happening?
  - Rate this twice, once emotionally and once objectively
- Does this statement fit with all the available evidence?

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### Challenging Thoughts

- Am I ignoring any safety factors?
- Does this always apply? Are there conditions under which this might not apply?
- Is there a gray area to this statement (not just a black and white thing)?
- Is this based on fact or feeling? Have my feelings ever turned out to be wrong?

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### Challenging Thoughts

- How much control do I actually have in this situation?
  - Am I taking responsibility for things over which I have no control?
  - Am I ignoring aspects of the situation that I can control?
- Is my expectation for this outcome realistic or even possible?

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### The Thought Record

- This is a physical manifestation of the thought challenging process
- Often used early in therapy to help client generalize CR skills outside of therapy
- Should be customized for the age and/or developmental level of the client

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### Example of an adult thought record

### THOUGHT RECORD

Trigger: \_\_\_\_\_

Cognitions (images, thoughts, assumptions, and/or beliefs): \_\_\_\_\_

\_\_\_\_\_

Strength of belief in cognitions (on a 1-7 scale): \_\_\_\_\_

Challenges to cognitions: \_\_\_\_\_

\_\_\_\_\_

Types of thinking errors: \_\_\_\_\_

\_\_\_\_\_

Alternative viewpoints:

- Worst outcome: \_\_\_\_\_
- Best outcome: \_\_\_\_\_
- Most realistic outcome: \_\_\_\_\_

What effect does this thought have on the way I feel? \_\_\_\_\_

\_\_\_\_\_

Rational responses:

Even though I feel that \_\_\_\_\_ is true

(thoughts or assumptions)

the reality is that \_\_\_\_\_

(answers to challenges and alternative viewpoints)

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## Using the Thought Record

- When teaching clients, it is important to make sure that they are recognizing thoughts and emotions accurately
- Practice in session with two-three records before clients do them on their own
- Review the records they did as homework the next week and make corrections as needed

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## OCRD Homework #3

- It's time to restructure yourself cognitively!
- You will complete 2 thought records daily (6 total) and turn them in Friday
- Use thought challenging and the list of common thinking errors to help!

[illegible]