# Intercession: Obsessive-Compulsive & Related Disorders – PSY 5960 8:00 am – 5:30 pm, MTWRF, ED 310 SYLLABUS, MAY 2018

Instructor: Caleb W. Lack, Ph.D.

Office: Old North 107 Phone: 405-974-5456

Office Hours: Seriously? It's a 9 hour a day class. No office hours!

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#### **TEXTBOOKS**

Lack, C.W. (Editor) (2015). *Obsessive-Compulsive Disorder: Etiology, Phenomenology, and Treatment*. United Kingdom: Onus Books. ISBN 978-0-9926000-5-1

Other readings will be made available via the course website.

#### **GOALS & OBJECTIVES**

This course will cover both basic and applied research on the DSM-5 class called Obsessive-Compulsive and Related Disorders (OCRD), as well as the chronic tic disorders. Specific goals for the class:

- 1. Defining the commonalities and differences seen in the OCRDs and tics
- 2. Understanding likely etiology of the OCRDs and tics
- 3. Becoming familiar with assessment methods (subjective, physiological, and behavioral)
- 4. Knowing the evidence-based treatments for specific OCRD and tic disorders

## **CLASS TIME & READINGS**

This course will include a mixture of lecture, in-class exercises, and discussion designed to assist your learning. When lecturing, I will be using PowerPoint slides to illustrate my lectures and assist you in your note taking. I will post the complete PowerPoint slides online (@ <a href="www.caleblack.com">www.caleblack.com</a>). Therefore, it would be best if you concentrate on listening and taking notes about what we discuss in class, rather than try to copy down all of the information on the slides.

There will be a large number of readings for this course, from both the required text and the supplemental materials. While it is not necessary for you to memorize all of the information, it is strongly recommended that you read all assigned materials before class. Also, as a majority of points available in this course will come from in-class exercises and discussions, attendance is crucial. Furthermore, there are only five days of class. Skip any and you will fail the course.

### **GRADING**

There are a total of four assignment types for this class, outlined below, worth 700 total points. Grades will be calculated as follows: 630 points and above = A, 560-629 points = B, 490-559 points = C, 420-489 points = D, below 420 points = F.

- In-class participation, 20 points per day: If you actively participate in class via asking and answering questions, responding to myself or the other students, you will receive these easily earnable points. If you do not participate, you will not gain these points. (100 points total)
- Video critiques, 50 points each: We will watch films in class, after which you will do a brief (one page, single spaced, emailed to me at the above address) review and critique of how well the film portrayed a specific disorder. You should focus on three aspects: a) what did the film get right, b) what did the film get wrong, and c) what could have been done to improve the portrayal of the disorder. Movies will be as follows: *The Aviator* (OCD, on Amazon Prime), *Matchstick Men* (OCD), *Clutter* (Hoarding, on Amazon Prime), *Young Adult* (trichotillomania), *The Tic Code* (chronic tics). (250 points total)

- OCRD homework, 50 points each: You will complete a series of assignments similar to what a client with an OCRD would be required to do. This will include symptom scales, a fear hierarchy, fear exposures, and cognitive restructuring. (200 points total)
- **Discussion questions, 20 points each**: Each day you will be required to bring one question for class discussion, based off of the readings. Questions should *not* be purely factual ("What is the prevalence rate for OCD?"), but instead conceptual or intellectually stimulating ("What could we as a society change to decrease the prevalence rate of trichotillomania?"). (100 points total)
- Reflection paper, 50 points: At the conclusion of class, you will turn in a one page, single-spaced reflection paper about your experiences this week. What is a reflection paper? A reflection paper is something that reflects your *personal* insights, opinions, or observations; in this case, that means thinking about how the material we covered and activities we did this week resulted in changes (or not) to your thoughts, beliefs, and behaviors. Here are some guidelines <a href="https://www.iirp.edu/pdf/IIRP-Reflection-Tip\_Sheet.pdf">https://www.iirp.edu/pdf/IIRP-Reflection-Tip\_Sheet.pdf</a>

## **CLASS OUTLINE**

Day 1 Introduction to course / OCD Day 1

Readings Syllabus, Lack chapters 1-4

Assignments Discussion question #1

Completion and scoring of self-report OCRD questionnaires

Critique of *The Aviator* 

# Day 2 OCD Day 2

Readings Lack chapters 5-8

Gunter, R.W., & Whittal, M.W. (2010). Dissemination of cognitive-behavioral treatments for anxiety disorders: Overcoming barriers and improving patient access. *Clinical Psychological Review, 30,* 194-202.

Olatunji, B.O., Deacon, B.J., & Abramowitz, J.S. (2009). The cruelest cure? Ethical issues in the implementation of exposure-based treatments. *Cognitive and Behavioral Practice*, *16*, 172-180.

Riggin, B.M., & Lack, C.W. (2016). Cognitive-behavioral therapy for youth with obsessive-compulsive and related disorders. *Current Psychiatry Reviews*, 12(1), 37-52.

Rosqvist, J. (2005). Description of the behavioral treatment strategy: Exposure. In *Exposure Treatments for Anxiety Disorders*, pp. 27-80. Routledge: New York.

Assignments Discussion question #2

Fear hierarchy creation

Critique of Matchstick Men

## Day 3 Hoarding / Body Dysmorphic Disorder

Readings Gibson, A. K., Rasmussen, J., Steketee, G., Frost, R., & Tolin, D. (2010). Ethical

 $considerations \ in \ the \ treatment \ of \ compulsive \ hoarding. \ \textit{Cognitive and Behavioral}$ 

Practice, 17, 426-438.

Landau, D., Iervolino, A. C., Pertusa, A., Santo, S., Singh, S., & Mataix-Cols, D. (2011). Stressful life events and material deprivation in hoarding disorder. *Journal of Anxiety Disorders*, 25, 192-202.

Mataix-Cols, D., Frost, R.O., Pertusa, A., Clark, L.A., Saxena, S. et al. (2010). Hoarding disorder: A new diagnosis for DSM-V? *Depression and Anxiety*, *27*, 556-572.

Pertusa, A., Frost, R.O., Fullana, M.A., Samuels, J., Sketekee, G., et al. (2010). Refining the diagnostic boundaries of compulsive hoarding: A critical review. *Clinical Psychology Review*, *30*, 371-386.

Muroff, J., Levis, M.E., & Bratiotis, C. (2014). Hoarding disorder. In Storch & McKay (Eds.), *Obsessive-Compulsive Disorder and Its Spectrum: A Life-Span Approach*, pp. 117-140.

Tolin, D.F., Frost, R.O., & Steketee, G. (2007). Meet the bad guys. In *Buried in Treasures* (chapter 4).

Tolin, D. F., Meunier, S. A., Frost, R. O., & Steketee, G. (2011). Hoarding among patients seeking treatment for anxiety disorders. *Journal of Anxiety Disorders*, 25(1), 43-48.

Bjornsson, A.S., Didie, E.R., Phillips, K.A. (2010). Body Dysmorphic Disorder. *Dialogues in Clinical Neuroscience*, 12(2), 221-232.

IsHak, W.W. (2012). Quality of life in Body Dysmorphic Disorder. CNS Spectrusm, 17(4).

Picavet, V.A., Gabriels, L., Grietens, J., Jorissen, M., et al. (2013). Preoperative symptoms of body dysmorphic disorder determine postoperative satisfaction and quality of life in aesthetic rhinoplasty. *Plastic and Reconstructive Surgery, 131*(4), 861-868.

Phillips, K.A., Menard, W., & Fay, C. (2006). Gender similarities and differences in 200 individuals with body Dysmorphic disorder. *Comprehensive Psychiatry*, *47*(2), 77-87.

Phillips, K.A., Menard, W., Fay, C., & Weisberg, R. (2005). Demographic characteristics, phenomenology, comorbidity, and family history in 200 individuals with body Dysmorphic disorder. *Psychosomatics*, *46*(4), 317-325.

Stein, D.J., Carey, P.D., & Warwick, J. (2006). Beauty and the beast: Psychobiologic and evolutionary perspectives on body dysmorphic disorder. *CNS Spectrum*, *11*(6), 248-251.

Wilhelm, S. Phillips, K.A., Didie, E., Bhulmann, U., Greenberg, J.L. et al. (2014). Modular cognitive-behavioral therapy for body dysmorphic disorder: a randomized controlled trial. *Behavioral Therapy*, 45(3), 314-327.

## Assignments

Discussion question #3

Cognitive restructuring

Critique of Clutter

#### Day 4

#### **Tic Disorders**

Readings

Bate, K.S., Malouff, J.M., Thorsteinsson, E.T. & Bhullar, N. (in press). The efficacy of habit reversal therapy for tics, habit disorders, and stuttering: A meta-analytic review. *Clinical Psychology Review*.

Bloch, M. H., & Leckman, J. F. (2009). Clinical course of Tourette syndrome. *Journal of Psychosomatic Research*, 67, 497-501.

Piacentini, J., Woods, D. W., Scahill, L., Wilhelm, S., Peterson, A. L., Chang, S., et al. (2010). Behavior therapy for children with Tourette disorder: A randomized

controlled trial. JAMA: Journal of the American Medical Association, 303, 1929-1937.

Shady, G., Broder, R., Staley, D., Furer, P, & Papadopolos, R.B. (1995). Tourette syndrome and employment: Descriptors, predictors, and problems. *Psychiatric Rehabilitation*, 19(1), 35-42.

Turtle, L, & Robertson, M.M. (2008). Tics, twitches, tales: The experiences of Gilles de la Tourette's Syndrome. *American Journal of Orthopsychiatry, 78* (4), 449-455.

Walkup, J.T., Ferrao, Y., Leckman, J.F., Stein, D.J., & Singer, H. (2010). Tic disorders: Some key issues for DSM-V. *Depression and Anxiety, 27,* 600-610.

Assignments

Discussion question #4

Fear exposures

Critique of The Tic Code

## Day 5

#### **BFRBs**

Readings

Grant, J.E., Odlaug, B.L., Chamberlain, S.R., Keuthen, N.J., Lochner, C., & Stein, D.J. (2012). Skin picking disorder. *American Journal of Psychiatry*, *169*, 1143-1149.

Langen, M., Durston, S., Kas, M. J., van Engeland, H., & Staal, W. G. (2011). The neurobiology of repetitive behavior:... and men. *Neuroscience & Biobehavioral Reviews*, *35*(3), 356-365.

Miltenberg, R.G., & Spieler, C.A. (2016). Body focused repetitive behaviors. In J.K. Luiselli (Ed.) *Behavioral Health Promotion and Intervention in Intellectual and Developmental Disabilities*, pp. 117-136. Springer.

Roberts, S., O'Connor, K., & Belanger, C. (2013). Emotion regulation and other psychological models of body-focused repetivie behaviors. *Clinical Psychology Review*, 33, 745-762.

Snorrason, &., & Woods, D. (2014). Hair pulling skin picking, and other body-focused repetitive behaviors. In Storch & McKay (Eds.) *Obsessive-Compulsive Disorder and Its Spectrum: A Life-Span Approach*, pp. 163-184.

Snorrason, I., Belleau, E. L., & Woods, D. W. (2012). How related are hair pulling disorder (trichotillomania) and skin picking disorder? A review of evidence for comorbidity, similarities and shared etiology. *Clinical psychology review*, 32(7), 618-629.

Stein, D.J., Grant, J.E., Franklin, M.E., Keuthen, N., Lochner, C., et al. (2010). Trichotillomania (hair pulling disorder), skin picking disorder, and stereotypic movement disorder: Toward DSM-V. *Depression and Anxiety*, *27*, 611-626.

Tucker, B. T., Woods, D. W., Flessner, C. A., Franklin, S. A., & Franklin, M. E. (2011). The skin picking impact project: phenomenology, interference, and treatment utilization of pathological skin picking in a population-based sample. *Journal of Anxiety Disorders*, *25*(1), 88-95.

Assignments

Discussion question #5

Critique of Young Adult

Reflection paper

## **UNIVERSITY POLICY**

**Student Etiquette:** Students will be expected to maintain a level of conduct described in the University Student Handbook and may be dismissed from the class if policies are not followed. Part of professional training is learning to behave professionally, including high levels of ethical conduct. Dishonesty includes cheating, violating the integrity of examination, plagiarism, or knowingly furnishing false information to the University or staff. Classroom misconduct includes disrespect for faculty or fellow students or disruption of the class by any means. Students are expected to be on time for class so as to avoid the disruption of learning and participation in discussion.

**Special Accommodations:** The University of Central Oklahoma complies with Section 504 of the Rehabilitation Act of 1973 and the American with Disabilities Act of 1990. Students with disabilities who need special accommodations must make their requests by contacting the assistant director of Disability Support Services, Kimberly Fields at 974-2549. The office is located in the Nigh University Center, Room 309. Students should also notify the instructor of special accommodation needs by the end of the first week of class."

# **Non-payment of tuition:** Please be aware of the following:

"If you do not pay your fees by the deadline, you'll be assessed a \$40 late payment penalty; and interest charges if the debt extends beyond a month. You will not be dropped from classes for non-payment. If you do not or cannot attend class, you must withdraw, or risk receiving 'F's on your transcript, in addition to owing tuition and fees."

**Emergencies during final examinations:** If an emergency occurs that prevents the administration of a final examination, the student's final course grade will be calculated based on the work in the course completed to that point in time and the faculty member's considered judgment. Final exams will not be rescheduled, and a grade of "I" will not be given as a result of the missed exam. This applies to situations when the administration of the final was impossible, not when an individual student is unable to take a scheduled final.

# Please review the Student Information Sheet available online at:

http://www.uco.edu/academic-affairs/files/aa-forms/StudentInfoSheet.pdf

The College of Education and Professional Studies is committed to helping students learn by providing a range of transformative learning experiences in discipline knowledge and in the five core areas: leadership; research, creative and scholarly activities; service learning and civic engagement; global and cultural competencies; and health and wellness.