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Abstract



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Patient and family factors associated with family accommodation in obsessive-compulsive disorder.

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Abstract

AIM: Obsessive-compulsive disorder (OCD) impacts family functioning as family members modify their personal and family routines, participate in rituals, and provide reassurance. These behaviors have been identified as family accommodation (FA), a phenomenon that, if ignored, may facilitate OCD symptoms and lead to poorer prognosis. Because FA has been recognized as a predictor of treatment outcome, we examined the prevalence of FA and identified patient and family sociodemographic and clinical variables associated with FA in an outpatient sample.

METHODS: The study comprised 228 subjects, namely, 114 patients with OCD and 114 family members, assessed before the patients entered a 12-session cognitive behavioral group therapy program. A multivariate linear regression model was used to control for confounding factors and to evaluate variables independently associated with FA. FA was evaluated using the Family Accommodation Scale for Obsessive-Compulsive Disorder-Interviewer Rated.

RESULTS: FA was found to be highly prevalent among family members. Two patient factors positively associated with FA were OCD severity as measured by the Clinical Global Impressions Scale and higher scores on the Obsessions dimension of the Obsessive-Compulsive Inventory-Revised. Family members' characteristics that were positively associated with FA were higher scores on the Obsessive-Compulsive Inventory - Revised hoarding subscale and being the patient's spouse.

CONCLUSION: Our findings suggest that the early identification of patients and family members who could benefit from interventions aimed at reducing FA could improve treatment outcomes.

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KEYWORDS: cognitive behavioral therapy; family accommodation; obsessive-compulsive disorder; predictors; symptoms (dimension)

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