Long-Term Outcomes of Obsessive-Compulsive Disorder in Children and Adolescents

Akademisk avhandling

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Abstract

Aim: The overall aim of this thesis is to investigate the long-term course and outcome of pediatric OCD following evidence-based treatment of pediatric OCD. Outcome is assessed with regard to severity of OCD symptoms (Studies I-III), psychosocial functioning (Studies I & II), and depressive symptoms (Study II). Method: Studies I and II include the same 109 participants (5-17 years), assessed and treated in Western Sweden, based on the clinical guidelines for OCD and individually adapted for each patient. Study III comprises 269 participants (7-17 years) from a multicenter study, in Sweden, Norway, and Denmark. Participants were treated with a first step of manualized cognitive-behavioral therapy (CBT). Non-responders were randomized to an extended treatment of either continued CBT or pharmacotherapy with sertraline. Both study samples were repeatedly assessed during a three-year follow-up period, using the semi-structured Children’s Yale-Brown Obsessive-Compulsive Scale (CY-BOCS) interview, and the self- and parent-rated questionnaires Children’s OCD Impact Scale (Studies I-II) and Children’s Depressive Inventory (Study II). Results: Studies I and II revealed a significant improvement of OCD symptoms from baseline to one-year follow-up, and improvements maintained and continued until the three-year follow-up. Participants’ psychosocial functioning and depressive symptoms improved during the follow-up period as well. Further, findings from the Study III sample showed that participants’ improvements from the one-year follow-up were maintained, and symptoms decreased further during the three-year follow-up period as well. Improvements were similar regardless of the treatment duration and type of extended treatment. Conclusions: The three studies indicate that the course of pediatric OCD is favorable, possibly due to treatment gains of evidence-based treatment, following expert consensus guidelines. Gains were sustained over a three-year period and symptoms decreased further during the follow-up period.

Keywords: adolescent, child, cognitive behavioral therapy, follow-up, obsessive-compulsive disorder, sertraline, symptom assessment, self-assessment