Perseveration in the development of Obsessive Compulsive Disorder: responses to mild, incidental doubt

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If normal doubt occurs, will OCD patients differ from non-OCD anxiety patients and healthy controls in how much uncertainty they will experience and will OCD patients respond to this with more perseveration (chekcing behavior) than non-OCD anxiety…

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Anxiety disorders and symptoms
Study type	Observational invasive

Summary

ID

NL-OMON39534

Source
ToetsingOnline

Brief title
Responses to mild, incidental doubt

Condition

- Anxiety disorders and symptoms

Synonym
Obsessive Compulsive Disorder, obsessive neurosis

Research involving
Human

Sponsors and support

Primary sponsor: Universiteit Utrecht
Source(s) of monetary or material Support: NWO

Intervention

Keyword: Development, OCD, Perseveration, Uncertainty

Outcome measures

Primary outcome

The main study parameters are level of uncertainty and checking behaviour.

Level of uncertainty will be measured by asking the questions *How certain did you feel when you reported *target present* in the past trials?* and *How certain did you feel when you reported *target absent* in the past trials?* (9-point Likert scale; 1 = not at all, 9 = very much). Checking behavior will be measured by *search time* (average time participants spend searching through a display) and several eye movement measures (using eye tracking).

Secondary outcome

not applicable

Study description

Background summary

Patients with Obsessive Compulsive Disorder (OCD) try to reduce obsessive uncertainty by *perseverative compulsions*, like checking repetitively. Earlier studies have found that compulsive perseveration paradoxically enhances uncertainty. This helps to explain why OCD persists. Here, we will examine paradoxical effects of perseveration in the development of OCD. Previous research has shown that OCD patients in general experience more uncertainty. When a normal, incidental doubt occurs, this will be superimposed on the increased general uncertainty of OCD patients, and may bring uncertainty to a level where perseveration is used to obtain certainty. If patients indeed respond to an extra doubt with perseveration, this specific uncertainty will be increased, which will reinforce the motivation to persevere, etc.
The proposed study is the first study to investigate whether this increased general uncertainty reflects a vulnerability that puts some individuals at risk of trying to reduce uncertainty by perseveration (checking), by studying both

OCD patients and non-OCD, anxiety controls, and comparing both also with healthy controls (all matched at group level).

Study objective

If normal doubt occurs, will OCD patients differ from non-OCD anxiety patients and healthy controls in how much uncertainty they will experience and will OCD patients respond to this with more perseveration (chekcing behavior) than non-OCD anxiety patients and healthy controls?

Study design

Mixed experimental design, with one within group independent variable (condition; certain - uncertain) and one between group independent variable (group; OCD patients - anxiety patients - healthy controls).

Study burden and risks

Participation in this study will not put the participant at risk for any harm or danger. The burden of this study is very minimal; the participant will only be asked to fill out some questionnaires and participate in a Visual Search Task on a computer.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

There are two patient groups. In the OCD patient group, participants will be included when they have a DSM-IV diagnosis of Obsessive Compulsive Disorder. In the anxiety-control group, participants will be included when they have a DSM-IV diagnosis of an anxiety disorder (non-OCD). All patients are allowed to use SSRI drugs, but not benzodiazepines, because these have a negative effect on ones reaction speed. The two patient groups and the healthy controls group will be matched at group level on gender, age and education level.

Exclusion criteria

Individuals with psychotic disorders, drug abuse or non-fluency in Dutch will be excluded. Healthy controls will also be excluded when they have any current psychiatric disorder. As mentioned, patients who use Benzodiazepine drugs will be excluded.

Study design

Design

Study type:	Observational invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Basic science

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	01-08-2012
Enrollment:	93
Type:	Actual

Ethics review

Approved WMO Date:	24-02-2012
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO Date:	16-07-2012
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO Date:	07-06-2013
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO Date:	02-04-2014
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL38052.041.11