

# FREQUENCY OF RELIGIOUS THEMES IN OBSESSIVE COMPULSIVE DISORDER

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## ABSTRACT

**Objective:** To assess the theme of religion on the symptomatology of obsessive compulsive disorder.

**Methodology:** This study was carried out at the Department of Psychiatry, Lady Reading Hospital, Peshawar from October 2005 to March 2006. Those who satisfied DSM-III R criteria for obsessive compulsive disorder were included in the study. Those suffering from neurological illnesses or any other psychiatric illness were excluded from the study.

**Results:** Fifty Muslim patients (36 Males and 14 females) fulfilled the DSM-III R criteria for obsessive compulsive disorder. The mean age of the group was  $25.87 \pm 7.39$  and for the 1<sup>st</sup> onset of obsessive compulsive disorder was  $21.36 \pm 8.21$  years. Themes of obsessions and compulsions were religious (60%), contamination (28%), and order/ safety (20%), in decreasing order of frequency.

**Conclusion:** This study reflects the role of religion which gives content to various obsessions and compulsions which may be helpful in early diagnosis of obsessive compulsive disorder in our culture. Further more the impact of these findings in term of psychological method of treatment such as cognitive behavioral therapy (CBT) could be significant in Islamic culture.

**Key words:** Obsessive Compulsive Disorder (OCD), Religion, Themes.

## INTRODUCTION

Obsessive compulsive disorder (OCD) is characterized by obsessions (mental phenomenon) and compulsions (motor act). Obsessions are recurrent, persistent thoughts, or images that enter the mind despite the person's effort to exclude them. Compulsions are repetitive and seemingly purposeful behavioral performed in a stereotyped way. A compulsion is usually associated with an obsession as if it has the function of reducing the distress cause by the latter. For example a hand washing compulsion often follows obsessional thoughts that the hands are contaminated with fecal matter<sup>1,2</sup>.

Although it has previously been suggested that OCD is a rare condition affecting 0.05% of the population, a recent large scale epidemiological survey in United States have shown a very higher prevalence of the condition<sup>3-5</sup>.

One of the comprehensive descriptive accounts of OCD was given by Sir Aubrey Lewis<sup>6</sup>. He not only emphasized the importance of

unwanted thoughts which came into a patients mind with active resistance but was also impressed by the frequency in which filth , sex, harm or religion were important contents (form refers to the structure of the phenomenon while content refers to the meaning reflected by it).

It has been suggested that religion may play an important part in development of some cases of OCD. It appears more common in people who have had a rigid and strictly religious upbringing<sup>7-10</sup>.

It is a common observation that culture may influence the presentation of psychiatric illness<sup>11</sup>. In this study religious impulses and cleaning rituals were prevalent in obsessive compulsive patients and were related to religious duties concept of sin and virtues because Muslims are required to start praying five times a day preceded by cleaning rituals called "Ablution". Prayers consist of prescribed sequential activities.

When an obsession starts these rituals are increased to a pathological degree depending upon

culture, religion and belief system. The impact of Muslim culture in phenomenology was noted by Mahgoub and Abdel Hafeiz<sup>12</sup>. Where themes of obsessions were predominantly related to religious practices, namely prayers and it is associated washings. Religious themes were evident in 50% of Jewish OCD subjects in Jerusalem<sup>13</sup>. Religion was not a theme in British series of OCD patients and was infrequent (11%) among Hindu OCD patients<sup>14,15</sup>. In the later theme of dirt and contamination were in preponderance due to socio-cultural background of the patients since Indians in general are pre-occupied with matters of purity and cleanliness.

In this context, because of profound importance of the frequency of various contents of obsessions and compulsions, we planned to undertake a study of pattern of OCD in Pakistan, a country with a profound Islamic Ideology.

At these initial stages, it is our earnest hope that this study would assess the influence of religion on the phenomenology of this disorder because the recognition and accurate diagnosis of OCD are the first steps in the proper treatment of this condition.

**METHODOLOGY**

The study was carried out at the psychiatric out-patient department of Lady Reading Hospital, Peshawar. The population comprised fifty consecutive subjects that attended the outpatient department between October 2005 and March 2006, satisfying DSM-III R (Diagnostic and Statistical Manual revised third Edition American Psychiatric Press) criteria for diagnosis of OCD<sup>16</sup>.

Diagnostic interview schedule has not been used and subjects were evaluated by the authors using an original proforma devised for the clinical interview Demographic data past and family history obsessive compulsive symptoms and associated features were recorded.

Premorbid personality traits were not taken into account Rating of the severity was carried out by using Yale Brown obsessive compulsive scale<sup>17</sup>. The operational definitions used are extracted mainly from DSM-III R. However, the definitions given in Lewis study were also used because these were more implicit and give further phenomenological transparency to methodology. The following operational definitions of OCD forms were adopted.

**Religious Themes:** They were related to rakaat of prayers (a set of sequential activities) wazoo, washing parts of the body a number of times in a fixed order urination, defecation, or contamination by either nocturnal emission, sexual intercourse or passage of flatus, renders the body unclean or impure and necessitate washing it again. In this

study doubts relating to number of rakaat of prayers are called religious repetition, and doubts relating to the proper execution of wazoo is considered as religious washing. Religious content predominated in both themes of obsessions and nature of compulsive activities (see Table 1).

**Religious Belief:** Religious belief were related to:

1. Faith about one's God
2. Existence of God
3. About I am Muslim or Kafir

Thoughts were related to abuses to God and Holy Quran. One Patient had peculiar religious obsession that while in SAJDA during prayer; he was in doubt that whether I am doing this SAJDA to God or wall. He considered it as doing to the wall and he is no longer a Muslim. In order to avoid this distressing thought this patient used to assume a peculiar posture with neck extended and eyes rolled up. He entered the OPD with the help of an attendant. These example are grouped together as faith under heading of religion in Table 1.

**Contamination:** They are as follows

1. Hands are dirty
2. Utensils are dirty
3. Germs and illness
4. Clothes are dirty
5. Contamination with germs
6. Foul smell

In this study cleansing compulsions due to contamination were differentiated from religious washing (Table 1).

**Table 1: Content of Obsessive Compulsive Symptoms**

Symptom	No.	%
1. Religion	30	60
a. Prayer	20	40
b. Body washing/Wuzoo	22	44
c. Faith	10	20
2. Contamination	14	28
3. Order/ Safety	10	20
4. Aggression	6	12
5. Sex	3	6
6. Death	2	4
7. Miscellaneous	3	6

**Table 2: Frequency of Religions Themes in OCD in Different Studies Common Themes of OCD in**

	Religion	Sex	Order/safely	Harm	Filth
England (N=45)		9%	11%	7%	38%
India (N=82)	11%	10%	27%	29%	46%
Jerusalem(N=10)	50%	10%	10%	20%	40%
Saudia Arabia (N=32)	50%	1%	31%	9%	41%
Pakistan (N=50)	60%	6%	20%	12%	28%

**Table 3: Frequency Of Obsessive Compulsive Symptoms**

Symptom	No.	%
Obsession		
Single	20	40
Multiple	30	60
<b>Total</b>	50	100
Compulsion		
Single	18	36
Multiple	28	56
None	4	8
<b>Total</b>	50	100

**Inanimate-Impersonal:** Doors, lock, bolt and other safety devices (e.g. gas heater).

**Aggression:** Physical or verbal assault on others e.g. homicidal and self harming thoughts e.g. needles may not pierce my eyes.

**Sex:** Regarding genitalia of either sex.

**Miscellaneous:** Phenomenon obsessional in nature but unclassifiable in the above categories, e.g. one subject said that he could not get rid of his consciousness or thought; “My friends took away money from my pocket, when I asked him about my money he give it to another friend after this he clenched his fist and teeth to get rid of this thought, during which he once broke (fracture) his teeth due to forceful closure of mouth”.

Comparison of themes in various studies is shows in Table 2.

**RESULTS**

The mean age of the group was 25.78 ± 7.39 years. The mean age for the first onset of OCD was 21.36 ± 8.21 years. The total duration of OCD was 4.49 ± 4.2 years. In the majority of or subjects (88%) the onset of OCD was before the age of 30 years.

**DISCUSSION**

The mean age of our study population and

for the first onset of OCD was similar to that of the studies done by Mahgoub OM et al and Lo WH et al<sup>12, 18</sup>. The mean duration of OCD in our study was found similar with the studies of Lo WH et al and Khanna S et al<sup>18, 19</sup>.

In the majority of our subjects, the onset of OCD was before the age of 30 years, a finding which is similar to that of studies in other countries<sup>12, 18</sup>.

In the series of obsessive-compulsive patients described by Akhter et al 46% were pre-occupied with dirt and contamination, and it was suggested that the socio-cultural background was significant in this respect as Indian in general are pre-occupied with matters related to purity and cleanliness<sup>15</sup>.

It appears that religion, cultural beliefs and concerns probably influence the themes of obsession and compulsion. In this study religion has an impact on the phenomenology of OCD in that the themes of obsession were predominantly related to religious practice namely prayers and/or their associated was not a theme present in British study of OCD patients by Stern and Cobb and was infrequent (1%) among Hindu patients in a study by Akhter S et al<sup>12, 14</sup>.

Mahgoub OM et al have reported the influence of religion on phenomenology of OCD,

and themes of obsessions were related to religious practices namely prayers and their associated washing<sup>12</sup>.

Religious themes were present in series of OCD patients in Egypt reported by Okasha A<sup>11</sup>. As compared to cleaning compulsions frequently reported in West by Stern and Cobb<sup>14</sup>, our culture and religion influenced the nature of commonly repeating compulsions. Prayers and/or their associated washing are commonest shared daily activity among Muslims so when an obsession starts, these rituals are increased to a pathological degree and they were the commonest rituals found in this study. In our patients, compulsion with religious contents being ego-dystonic were not considered religious activities but were considered as morbid behavior and were associated with resistant distress and these compulsions actually detract patients from the quality of other areas of religious practices.

Also there was clear diversion from their previous life styles so they are not features of the personality disorder. Similar views regarding rituals with religious themes were expressed by Greenberg et al in the Jewish patients suffering from OCD<sup>10,13</sup>.

It has been observed in these studies that patients suffering form OCD (with religious theme) also wanted expert opinion from religious leader on the status of there disease and religious law. In the study by Greenberg et al, for patients suffering from OCD, consultation with Rabbi was recommended before embarking on psychological treatment<sup>9-11</sup>.

## CONCLUSION

This study reflects the role of religion which gives content to various obsessions and compulsions which may be helpful in early diagnosis of obsessive compulsive disorder in our culture. Further more the impact of these findings in term of psychological method of treatment such as cognitive behavioral therapy (CBT) could be significant in Islamic culture.

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