

Obsessive Compulsive Disorder, one of the associated neuro-biological disorders of TS, is difficult to live with and it is often invisible to other people.



## People With TS Often Have OCD

- **Obsessive Compulsive Disorder is often associated with TS**
- **OCD is an anxiety disorder characterized by:**
  - **Recurrent, unwanted thoughts and images (obsessions), and/or**
  - **Repetitive behaviors (compulsions) which the person hopes will prevent the obsessive thoughts or make them go away**
    - **Performing the “rituals” provides only temporary relief**
    - **Not performing them significantly increases anxiety**



Obsessive compulsive disorder can be mild or severe. Just like all issues with TS, the symptoms can wax and wane. Depending on how mild or severe the symptoms, it may even go unrecognized by the parent. Living with obsessive compulsive behaviors can result in the child being stuck, driven, or in becoming a perfectionist in some area.



## Obsessions & Compulsions

- **Obsessions**
  - Germs, neatness, social embarrassment, order, symmetry, thoughts of violence, thoughts prohibited by religious beliefs, hoarding...
- **Common Compulsions (rituals)**
  - Handwashing, locking/relocking doors, counting, checking, touching (especially in a particular sequence), haircombing...
- **The rituals interfere with daily life and can be isolating and embarrassing**
  - People with OCD must perform them even though they are distressing
  - Some adults and children do not recognize their behaviors as being unusual



Obsessions are unwanted, intrusive thoughts, images or impulses that get stuck in the child's mind and can be unpleasant and disruptive.

Compulsions are the behaviors that are used to reduce the anxiety that accompany those obsessions. The compulsions often need to be performed over and over again.

Many times the student does not let others know about these obsessions and compulsions because they know they are irrational and don't want others to think they are different or "crazy." Living with OCD can be a very isolating experience.



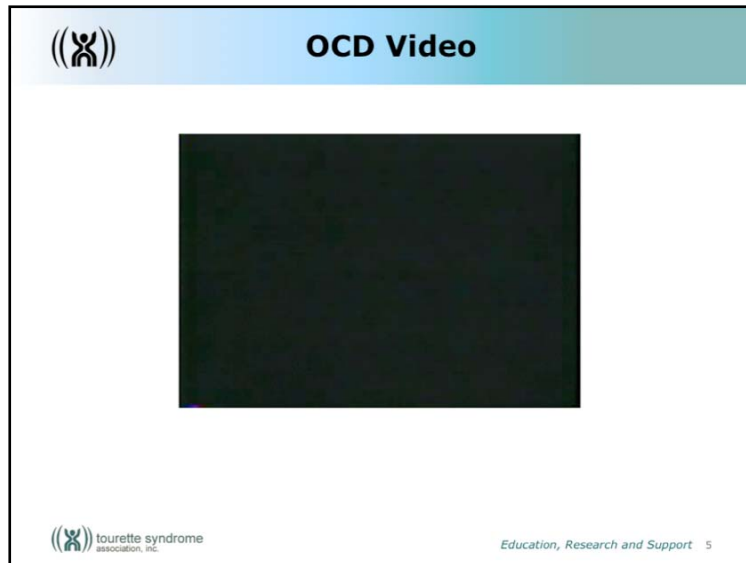
## Students and OCD

- **Some common problems seen in school as a result of OCD**
  - **Difficulty transitioning from one activity or location to the next**
  - **Touching things that are off limits, such as fire alarms**
  - **Inability to tolerate mistakes**
  - **Constant erasing**
  - **Not being able to start a task due to fear of imperfection**
  - **Refusal to eat or participate due to obsession with germs**
  - **Not completing work or appearing inattentive due to performing compulsions**



Due to their obsessions and compulsions, students with OCD will have a variety of issues or difficulties and may be very rigid in their thinking. The following list is just an example of some of the more common problems that may be exhibited.

- **Transitioning** – making the change or movement from one activity to the next or from one physical location to the next.
- **Touching** – a student may have a compulsion to touch objects, people, or things off limits such as a hot iron, a pot on the stove, a sharp object or a fire alarm.
- **Perfectionism** – can interfere with the child's educational performance. An example is being unable to tolerate a mistake when writing. The student may erase through the paper, rewrite the word numerous times, throw the paper away and begin again, all of which takes up valuable time. Some students are unable to even begin a task due to fear of not doing it perfectly. Other signs of perfectionism might be a student continually seeking confirmation or reassurance from a teacher.
- **Contamination**– may involve fear of germs, refusal to eat for various reasons, irrational fear of close proximity to others and issues of food contamination.
- **Picking**- at skin or scabs.
- **Counting, lining things up** – a child may count and have the need to line things up physically or mentally. Students may count ceiling tiles, number of steps on a stairway, the number of times they chew on each side of their mouth; virtually anything. Many students must count words as they read.
- **Checking** - the need to go back and make sure that you have done something. Many of us check to make sure that we have pulled the plug on the iron or locked the front door. Students with OCD may have the compulsion to check things multiple times to the point that it interferes with their daily lives.
- **Constant worrying or doubt** – here's an example: a child has an obsession that his mother will have an accident or get hurt while he is in school. The compulsion would be to call his mother frequently during the day to check on her. Of course, making these calls would be disruptive to his school day but the obsessive thinking, if not resolved, would make it difficult for him to focus on his schoolwork.



This student gives a very real explanation as to what OCD is like in his life. OCD affects everybody slightly differently and again it can be very mild to very severe and life altering. This young man struggled as a student with his TS issues but now is a psychologist who specializes in TS.

## You See the Symptoms – Now What?


- **If obsessive compulsive symptoms are observed, the situation should be brought to the parents' attention**
  - Parents may not be aware of the problems or the severity
  - Early diagnosis is important
- **Teacher & Parent discussions may include the student**
  - Need to develop strategies and techniques to manage the symptoms
- **An outside, formal evaluation may be beneficial**
  - Treatments are available, but are particularly challenging for OCD+TS



If you notice symptoms that appear to be signs of OCD, it is important that it is brought to the parents' attention. It is often helpful to have a discussion between the parent, child and teacher in order to develop strategies and techniques to manage the symptoms. An outside evaluation for OCD may be beneficial for a child with TS who is struggling with starting or completing work. Early diagnosis is important.

**OCD Management at School**


- **Use Assistive Technologies where applicable**
  - Computers can help address compulsive erasing and having to re-write to achieve perfect letter formation
  - Audio books for students who count lines and letters in text books, etc.
- **Provide extended time for test taking and assignments**
- **Stay in touch with the parents**
  - Therapists may be available to provide school strategies
- **Educate the students, teachers and support staff**
  - Understanding and compassion are essential in the classroom
- **Involve the student!**






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- Thankfully, we live in a time where we can use many assistive technologies to support the student. The student who constantly erases, has to count words in a sentence, must form his letters perfectly can be helped by various technologies. By using a computer, he can write his assignment without the need to destroy the document if he makes an error. The delete button works more easily and effectively.
- A student who loses concentration due to counting, eye tics, head jerks, etc., may be helped by listening to the text on tape or by using “read-aloud software”.
- Many students with OCD will need extended time on tests and assignments in order to cope with their symptoms which interrupt their ability to complete their work.
- Obsessive compulsive disorder presents a variety of challenges to students many of which are unseen. You will need to think creatively to help these students. Ask the child what he or she needs to make it easier to produce their work. It is amazing what these students can frequently come up with on their own.

 **Summary**

- **OCD is an anxiety disorder that includes compulsions (rituals) that impact school performance**
- **Teachers may recognize OCD before the parents or student**
  - **Early diagnosis is important**
- **OCD management strategies are needed at school**
  - **Teachers and parents must communicate and involve others**
- **OCD waxes and wanes like TS**
  - **Stick with strategies that are working and involve the student**

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Obsessive compulsive disorder can be a complicated issue both in the home and school environments. What might be a problem in the home may not be a problem in school. As an example, a child with contamination issues who refuses to eat off the cafeteria trays in school or drink out of school cups may be fine in the home situation. Then again they may have contamination issues at home but it may not carry over into school. A child may have to count the tiles or touch objects every time he or she walks up to the teacher's desk to hand something in or ask a question.

Good home-school communication is a must to help these children with the tremendous level of stress they carry all day.



**Contact TSA for More  
Information and Resources**

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TSA is a wonderful organization that has been around for over 35 years working for and with individuals and families with TS. Don't hesitate to call the Tourette Syndrome Association, become a member and get involved. They have many resources for you to check out and take advantage of on their web site.