

Mild obsessive-compulsive symptoms in healthy children are linked with cerebral changes

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A new study carried out by the Bellvitge Biomedical Research Institute (IDIBELL) and the Institute of Global Health of Barcelona (ISGlobal) associates first-time mild obsessive-compulsive symptoms to characteristics and specific alterations of the cerebral anatomy. Such symptoms are present in a much higher percentage of cases than those that require specialized medical and psychological attention. The work, recently published by the *Journal of the American Academy of Child and Adolescent Psychiatry*, provides a new perspective regarding prevention strategies for long-term mental health disorders.

Obsessive-compulsive disorder is a serious <u>mental disorder</u> that affects between 1 percent and 2 percent of the population. On the other hand, mild obsessive-compulsive symptoms are much more frequent, and may be present in up to 30 percent of the population. These symptoms include recurrent thoughts about infectious contamination, fear of having inadvertently carried out some potentially dangerous behavior (such as leaving the door open when leaving home), or the need to place objects in perfect order and symmetry.

Likewise, these symptoms are frequently accompanied by repetitive and unnecessary cleaning, checking or organization behaviors that, although they are generally perceived as excessive, are difficult to control. Although in most <u>cases</u> these mild symptoms do not interfere with daily life and do not require special attention, in some cases, after a prolonged



stress situation, they can lead to the appearance of a more severe condition that requires specialized treatment.

Childhood is a period especially sensitive to the presence of these obsessive-compulsive symptoms. As with adults, in most cases, these symptoms will never significantly interfere with normal functioning. "In a small percentage of cases, however, these symptoms may be indicators of an increased risk of developing an <u>obsessive-compulsive disorder</u> that requires treatment, during childhood or in adulthood," says Dr. Carles Soriano-Mas, lead author of the study.

In the study, 255 boys and girls between eight and 12 years of age, all healthy, and without any diagnosis of any <u>mental health</u> disorder, were asked to answer a questionnaire about the presence of mild obsessivecompulsive symptoms. Boys and girls showed a variable presence of this type of symptoms. The most frequently observed were those related to behaviors of checking, ordering and looking for symmetry, or the unnecessary accumulation of objects, as well as the repeated presence of negative and disturbing thoughts.

The children, with the consent of their parents or legal guardians, also underwent a structural magnetic resonance, a totally innocuous technique that allowed researchers to observe their cerebral anatomy. "When comparing the results of the questionnaire to the cerebral anatomy, we found that the symptoms observed, in spite of their mildness, could be associated to specific anatomical characteristics. Interestingly, these same anatomical characteristics have also been observed in patients with more severe symptoms, with a diagnosed obsessive-compulsive disorder," explains the IDIBELL researcher.

These results suggest that some mental <u>disorders</u> like obsessivecompulsive disorder can be considered as an extreme manifestation of certain characteristics that frequently appear among the healthy



population. "It is also necessary to consider other factors of a diverse nature, such as social, educational and general welfare ones, to determine why in some cases these symptoms remain mild and under control, and in others they evolve to more severe forms that require specialized attention," adds Dr. Soriano-Mas.

The results may also have an impact on prevention strategies for mental health disorders. For example, brain anatomy could be more closely monitored in those people where there is suspicion of an <u>increased risk</u> of developing a mental disorder (the children of parents with <u>mental health problems</u>, for example), so that the probability of developing a pathology that interferes with their normal development can be estimated.

More information: Maria Suñol et al, Brain Structural Correlates of Subclinical Obsessive-Compulsive Symptoms in Healthy Children, *Journal of the American Academy of Child & Adolescent Psychiatry* (2017). DOI: 10.1016/j.jaac.2017.10.016

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