

Excellent long-term stability of treatment gains of stepwise treatment for pediatric OCD

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A study in the *Journal of the American Academy of Child and Adolescent Psychiatry* (JAACAP) reports that the long-term stability of treatment gains for children and adolescents diagnosed with obsessive-compulsive disorder (OCD), participating in a stepwise manualized treatment, is excellent.

"OCD is a persistent and highly disabling psychiatric disorder and affects 0.25 to 4 percent of children

and adolescents. Untreated, pediatric OCD can become chronic and disrupts the child's <u>normal development</u>, contributing to poor quality of life and functional impairment," said first author Karin Melin, Ph.D. and Head Nurse at the Department of Child and Adolescent Psychiatry, Sahlgrenska University Hospital, Gothenburg, Sweden. "Early diagnosis and treatment are crucial for the prevention of possible lifelong impairment, and these findings suggest that most participants respond well to treatment for pediatric OCD, and the long-term outcome is correspondingly good."

Immediate improvements in child and <u>adolescent</u> OCD symptoms following treatment in the study that included a first step of manualized cognitive-behavioral therapy (CBT). If needed, extended treatment with CBT, or a switch to pharmacotherapy with sertraline, was sustained and further improved over a three-year period after treatment.



Additional long-term improvements were also found in psychosocial functioning and a reduction in <u>depressive symptoms</u> associated with treatment.

"Single treatment with manualized CBT, seems to be the most beneficial and safest treatment to offer children and adolescents who initially present with OCD," added Dr. Melin.

These findings are based on results from The Nordic Long-term OCD Treatment Study (NordLOTS).

The study population consisted of 269 participants in the age 7-to-17 years of age who were diagnosed with OCD. All participants received individualized CBT for 14 weeks; non-responders to initial CBT were randomized to continue CBT or pharmacotherapy with sertraline for 16 weeks. Three years after initial CBT, 90 percent of participants were rated as responders and 73 percent were in clinical remission.

More information: Karin Melin et al. Treatment Gains Are Sustainable in Pediatric Obsessive-Compulsive Disorder: Three-Year Follow-Up From the NordLOTS, *Journal of the American Academy of Child & Adolescent Psychiatry* (2019). DOI: 10.1016/j.jaac.2019.01.010

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