

OBSESSIVE-COMPULSIVE DISORDER

Information sheet

BEHAVIOURAL COGNITIVE PSYCHOTHERAPY UNIT

at Springfield University Hospital, London SW17 7DJ

The Behavioural Cognitive Psychotherapy Unit (BCPU) at Springfield, the headquarters of South West London and St George's Mental Health NHS Trust, is an internationally renowned treatment centre dealing with severe, complex, resistant obsessive-compulsive disorder (OCD). The unit is affiliated with St George's, University of London. It is a unique resource within the NHS offering specialised 24-hour inpatient treatment of OCD for patients who have failed to respond to treatment from their local services.

We combine behavioural and cognitive methods with state of the art psychopharmacological and other treatments as necessary. We have close liaison with specialists who work in the neurobiology and psychopharmacology of OCD as well as with psychotherapists of various schools.

We have an experienced staff-base. Some staff have worked in our unit for 20 years. Our commitment to teaching and research, however, means that we have young enthusiastic professionals also joining the team. This ensures we are continuously challenged to ensure our treatments are at the forefront of modern psychiatric and psychological treatment.

Each patient is fully assessed and has an individualised treatment programme. Progress is constantly monitored using questionnaires of known reliability and validity. Thus any treatment which is not effective is discovered early, the reasons are examined and treatment changed or modified.

WHAT MAKES US UNIQUE?

- We are the ONLY NHS 24-hour staffed unit dedicated to the treatment of OCD in the country offering specialist inpatient care at level 6 of the recent NICE clinical guidelines for treatment of OCD and Body Dysmorphic Disorder (BDD).
- Multidisciplinary team and close liaison with other specialists mean that we can offer individualised treatment regimes based on current evidence-based or pioneering treatments.
- Our individual treatment programmes are constantly monitored to ensure maximum efficacy.
- These individualised treatment programmes mean we pioneer new treatments and are at the forefront of developing new ideas about the treatment and aetiology of OCD.
- Our flexible and individualised approach to treatment means we are able to offer a variety of means to ensure that gains made in hospital are maintained in the community. These include home visits, close working with local care co-ordinators and training of care co-ordinators/keyworkers, telephone treatment and monitoring following discharge.

TREATMENT:

The treatment for OCD involves behavioural and cognitive interventions.

Graduated exposure involves the patient confronting the feared stimulus for prolonged periods. The patient's anxiety tends to decrease with repeated exposure. For example, people with obsessions about contamination are encouraged to handle "dirty" items, such as picking up an object from the floor, until their anxiety is extinguished.

Self-imposed response prevention involves identifying and resisting any responses that terminate the exposure to the feared stimulus. For example, with a person who fears contamination, they should not only pick up the object, but then they need to resist the ritual to wash their hands. For exposure to be of help it needs to be combined with the prevention of the ritual/compulsion.

Cognitive therapy enables the patient to identify present dysfunctional beliefs about the problem, which may develop from significant early life experiences, and the factors which maintain it. The therapist then guides the patient in using techniques for challenging appraisals and the basic assumptions on which these are based. Treatment also includes engagement in the daily group programme (activity and psycho-educational) facilitated by the occupational therapist and nursing staff.

TEACHING:

The unit has an ongoing commitment to teaching and training. As well as the training of medical students, trainee psychiatrists, nurses, psychologists and occupational therapists in the treatment of OCD and the use of behavioural and cognitive psychotherapy, there are also several training courses run in conjunction with the Department of Mental Health at St George's Hospital Medical School. Clinicians are available to do workshops/presentations on site, with at least six weeks notification.

RESEARCH:

- The unit is committed to research and continuous development. Controlled trial of Danger Ideation Reduction Therapy in the treatment of contamination fears in patients with severe, chronic resistant OCD. This project is being conducted in collaboration with the University of Sydney, New South Wales.
- Retrospective and prospective studies examining delayed sleep-phase shift in patients with severe, chronic OCD. This project is being conducted in collaboration with the Queen Elizabeth II Hospital Welwyn Garden City and Hertford University.

INPATIENT REFERRAL CRITERIA:

- The Behavioural Cognitive Psychotherapy Unit (BCPU) is a National Tertiary Referral Service, which specialises in treating people with severe, complex, resistant disorders, particularly Obsessive Compulsive Disorders (OCD), but also Body Dysmorphic Disorder (BDD) and other anxiety/phobia-based problems.
- As the BCPU is a tertiary service it will only accept referrals made by consultant psychiatrist in a CMHT or as RMO.
- Clients are selected for being suitable for inpatient treatment due to the nature and severity of the condition, outlined in the NICE Clinical Guidelines for OCD and BDD.
<http://www.nice.org.uk/page.aspx?o=cg031niceguidelineword> (page 35)
- Clients should have received a trial of Behavioural Cognitive Psychotherapy and at least 2 SSRIs prior to referral.
- Referrals need to provide a clear identification of client's current problems and relevant history, a current Care Plan and Risk Assessment. If significant risk is denoted, details of the client's care co-ordinator and their continued involvement must be included.
- Referrals of patients under section are not accepted. Once the section has expired or been rescinded then assessment will be conducted. This is to ensure the client is providing informed consent to undertake therapy.
- BCPU is unable to accept clients with a primary condition of acute psychosis, depression, anti-social behaviour, drug/alcohol dependency or current self-harm/suicidal/violent behaviour.

Referrals should be made to:

South West London and St George's Mental Health NHS Trust

The BCP Unit, White Lodge, Springfield University Hospital,
61 Glenburnie Road, London SW17 7DJ

Tel: 0208 682 6961 **Fax:** 0208 682 6965

www.swlstg-tr.nhs.uk