

The International Journal of Neuropsychiatric Medicine

The Third International Obsessive-Compulsive Disorder Conference

**Epidemiology of Obsessive-Compulsive Disorder:
Cross Culture and Economy**

D. W. Black

**Third IOCDC:
Childhood and OCD**

M. A. Riddle

**OC Spectrum Disorders:
The Impulsive and Schizo-Obsessive Clusters**

E. Hollander, J. Rosen, and the IOCDC OC Spectrum Work Group

**Summary of the Genetics of
Obsessive-Compulsive Disorder Proceedings
of the Third IOCDC**

M. T. Pato, C. N. Pato, J. L. Kennedy, and D. L. Pauls

**Neuroimaging Research and Neurocircuitry Models of
Obsessive-Compulsive Disorder:
Proceedings of the Third IOCDC**

*S. L. Rauch, C. Benkelfat, S. R. Dager, B. D. Greenberg, T. Hendler, E. Hollander, M. Laruelle,
D. R. Rosenberg, S. Saxena, J. Zohar, and L. R. Baxter, Jr.*

**Cognitive-Behavioral Therapy and Integrated Approaches
in the Treatment of Obsessive-Compulsive Disorder**

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Treatment of Obsessive-Compulsive Disorder

S. A. Montgomery

The **International Obsessive-Compulsive Disorder Conference (IOCDC)** process is an annual meeting that brings together the world's leading experts in obsessive-compulsive disorder (OCD) and other related disorders and methodologies to address unanswered questions and unresolved issues in OCD. The Fourth IOCDC will take place February 2000 in the US Virgin Islands.

This supplement, *The Third International Obsessive-Compulsive Disorder Conference (IOCDC)*, is a collection of monographs approved by the editors of *CNS Spectrums*. This supplement was funded with an unrestricted educational grant by Solvay Pharmaceuticals and Pharmacia & Upjohn. The eight monographs inside represent a synthesis of the eight workshops of the Third IOCDC conference held in Madeira, Portugal, on September 11-12, 1998.

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The Third IOCDC

By Eric Hollander, MD, Joseph Zohar, MD, and Donatella Marazziti, MD, PhD

The Third International Obsessive-Compulsive Disorder Conference (IOCDC) was held in Madeira, Portugal, on September 11-13, 1998. The IOCDC process is an annual meeting that brings together the world's leading experts in obsessive-compulsive disorder (OCD) and other related disorders and methodologies to address unanswered questions and unresolved issues in OCD. This process utilizes a workshop approach to synthesize state of the art research and suggest strategies to move each selected topic ahead. The eight monographs included in this academic supplement represent a synthesis of the eight workshops of the Third IOCDC.

The International Organizing committee consists of Eric Hollander, MD, Joseph Zohar, MD, and Donatella Marazziti, MD, PhD. The IOCDC conference and this special academic supplement in *CNS Spectrums* was generously supported by an unrestricted educational grant from Solvay Pharmaceuticals and Pharmacia & Upjohn, for which we are most grateful. This ongoing IOCDC process will now be closely integrated with the International Research Consortium, to promote ongoing multicenter research initiatives in key areas of OCD research.

Black highlights epidemiology, cross-cultural, and economic issues in OCD. He stresses the need for more research in key areas, including the prevalence of OCD in non-Western and developing countries; the study of offspring of OCD adults; the study of quality of life impact of OCD; the study of OCD spectrum disorders in epidemiologic samples; and the impact of personality features, OCD heterogeneity and subtypes on longitudinal course of illness and treatment outcome.

Riddle summarizes six areas of research relevant to childhood OCD: phenomenology, age of onset, subtypes, infectious/immune etiologies, psychosocial treatments, and medication treatments. While there is a relative paucity of research in this area, since the Second IOCDC childhood research has flourished.

Hollander, Rosen, and the Obsessive-Compulsive Spectrum Workgroup focus on two symptom clusters within the OC spectrum—the impulsive cluster and the schizo-obsessive cluster. Studies of the phenomenology, course of illness, neurobiology, and treatment response of specific disorders within these clusters are highlighted. Larger scale controlled studies in this area are sorely needed.

Pato, Pato, Kennedy, and Pauls summarize the state of the art genetics research in OCD. They present strong evidence of familial transmission of OCD and new strategies for molecular genetic research. The importance of phenotype definition and systematic subtyping to reduce heterogeneity and false-positive results are emphasized. The need for an international

collaborative approach with standardized methodology is highlighted to advance the field.

Rauch and colleagues assess neuroimaging research and neurocircuitry models in OCD. Animal models help define normal anatomy and circuitry. Functional imaging studies have utilized complementary behavioral, pharmacologic, and cognitive challenge paradigms. Other methods, such as magnetic resonance spectroscopy and transcranial magnetic stimulation, yield data on neurochemistry and have therapeutic potential, respectively. Key areas of focus include experimental design/data analytic methods, neurobiologically meaningful subtypes, and predictors of treatment outcome.

Hohagen addresses cognitive-behavior therapy and integrated approaches to OCD. Unanswered questions include the role of cognitive therapy in OCD, the role of multimodal and group therapy in OCD, outcome predictors in childhood OCD, and the role of combination medication—behavioral treatment of OCD, neurobiological changes during cognitive-behavioral therapy (CBT), and when to choose a selective serotonin reuptake inhibitor (SSRI) vs CBT vs both.

Marazziti elucidates the experimental pharmacology of OCD. Unanswered questions remain, including which 5-HT subsystems are principally involved in OCD, and how they interact with other systems. Compounds that have potential therapeutic efficacy and deserve testing include agents acting on 5-HT_{2A} and 5-HT_{2C} receptors and compounds that inhibit protein kinase of type C, potentiate protein kinase of type A, or act on G-protein subunits.

Montgomery reviews treatment studies with SSRIs, long-term treatment, psychological treatments and augmentation strategies. SSRIs remain the treatment of choice in OCD, are well tolerated, and specific agents manifest a dose-response relationship.

This academic supplement highlights state of the art research and unanswered questions about OCD. We eagerly await the Fourth IOCDC to take place in February 2000, which will closely interdigitate with the International OCD Research Consortium and usher in the next millennium of OCD research.

On a sad note, we note the untimely passing of Dr. Per Mindus. Dr. Mindus was an active participant throughout the IOCDC process, a leading pioneer of the use of neurosurgical treatment of refractory OCD at the Karolinska Institute and in the US, and the driving force behind the OCD educational and support system in Scandinavia. Dr. Mindus, a scientist, physician, educator, colleague, collaborator, and gentleman, will be sorely missed by the OCD community, and we dedicate the issue of *CNS Spectrums* to his memory. **CNS**

Dr. Hollander is professor of psychiatry and director of clinical psychopharmacology, and of the Compulsive, Impulsive, and Anxiety Disorders Program, at Mount Sinai School of Medicine in New York City. He is also the editor of this journal. Dr. Zohar is the director of the Psychiatric Department at The Chaim Sheba Medical Center in Tel-Hashomer, Israel. He is also the international editor of this journal. Dr. Marazziti is professor of psychiatry in the Dipartimento di Psichiatria, Neurobiologia, Farmacologia e Biotecnologia at the University of Pisa, Italy. She is also the associate international editor of this journal.

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