PATTERNS OF OCD DIAGNOSIS, ACCOMMODATION AND IMPAIRMENT AMONG FIRST-DEGREE RELATIVES OF CHILDREN WITH OCD

Research Objectives:
To assess the cumulative impact of multiple OCD diagnoses on family accommodation and perceived family functioning in families of children with OCD.

Methods:
The sample comprises 311 OCD-affected children and their first-degree relatives. Proband OCD diagnoses were determined according to DSM-IV/DSM-5 criteria as confirmed by consensus between a child and adolescent psychiatrist and psychologist. OCD symptoms were captured via the Florida OCD Inventory (FOCI), family functioning impairment via the OCD Family Functioning (OFF) scale, and accommodation via the Family Accommodation Scale for Obsessive-Compulsive Disorder (FAS). All three measures are psychometrically sound and validated on pediatric OCD populations. Pearson bivariate correlations (r) and t-tests were used to evaluate statistical associations in the data.

Results:
Among probands, 37.6% (n=117) had at least 1 first-degree family member with diagnosed OCD. Specifically, 27.3% (n=85) had a parent and 14.5% (n=45) had a sibling with diagnosed OCD. OCD-diagnosis in a first-degree relative was not associated with family accommodation or impairment. However, modest correlations of mean family FOCI scores were identified with family impairment (r=0.30, p< 0.001) and accommodation (r=0.20, p=0.002). Looking at siblings specifically, family impairment (r=0.27, p=0.001) but not accommodation (r=0.12, p=0.17) was significantly associated with sibling FOCI. In contrast, parent FOCI was significantly associated with accommodation (r=0.17, p=0.024) but not impairment (r=0.13, p=0.08).

Conclusions:
Findings of this clinical pediatric OCD sample align with those of past family studies, reflecting high rates of OCD in first degree relatives. Both family accommodation and functioning were modestly associated with mean family OCD symptom severity.