



COVID-19 and Early Diagnosis of Pediatric Obsessive - Compulsive Disorder: A Case Report

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Abstract

Since the current outbreak of COVID-19, the disease has been a dominating headline in media around the world causing serious psychological impact on vulnerable patient groups. Major obsessional concern is the fear of contamination or germs in patients with OCD. We present the case of a 9-year-old girl with the family history of OCD and major depressive disorder. The case highlights the emergence of the masked OCD symptoms precipitated by school lockdown, media reporting and fearful response of her family to such news. We also highlight the impact of pandemic in early diagnosis of juvenile obsessive-compulsive disorder.

Keywords: COVID-19; Pediatric obsessive-compulsive disorder; Children's version of the Yale-brown obsessive compulsive scale (CY-BOCS); Family accommodation; Lockdown

Introduction

Obsessive-Compulsive Disorder (OCD) is a mental illness characterized by intrusive thoughts and compulsive acts. It has a lifetime prevalence of 2 % to 4% in children and adolescents. However, the point prevalence of OCD in pediatric population is between 0.5% and 1% [1]. The course of OCD in young children differs greatly from adolescents and adults. Majority of children with OCD are deficit of cognizant to their thoughts and consider their fears as real, and the patient may not be entirely conscious of reasons to perform a ritual. It's obvious from family studies that Obsessive-Compulsive Disorder (OCD) is a genetically heterogeneous disorder [2]. OCD has been linked to diminished life quality and concomitant psychiatric conditions [3]. COVID-19 pandemic has huge impact on mental health of general population. Recent published research has focused on the mental health effects of physical distancing, quarantining and self-isolation during the current era of COVID-19. These studies also emphasizes on the deteriorating mental health of health-care professionals. There have been a few studies on the effect of COVID-19 on mental health of children with family history of contamination OCD. Worsening of OCD symptoms were evident during previous epidemics like SARS, along with noticeable relapse of such symptoms [4]. We hereby report a unique case of a 9-year-old girl with family history of OCD and major depressive disorder. The patient presented acutely with symptoms of OCD triggered by lockdown, media broadcasting and cleaning rituals of her family.

Case Presentation

A 9-year-old girl studying in 4th grade was brought to a psychiatric clinic for assessment of obsessive-compulsive symptoms. She was born healthy after an uncomplicated pregnancy at full term. She was developmentally normal. Right after the lockdown due to COVID-19, she suddenly started to avoid touching the door handles and tried to open the doors with her foot. She thought that "Coronavirus is everywhere". She imagined that the bubbles coming out of ice cubes in her water are "dangerous germs" and often refused to drink iced water. She refused to touch the "contaminated" school text books which were delivered a few days ago from nearby bookstore. Her eating habits changed dramatically and she became very cautious about cleanliness of cutlery. She was extremely worried about the health of her 3-year-old brother who used to play barefoot in mud. Upon further exploration her mother revealed the decline in her academic performance during last semester and spending long hours in watching cartoon series on her Smartphone. With respect to family history, her father was diagnosed with OCD when he was 14. Her grandmother and two uncles had major depressive disorder. Her aunt was recently diagnosed with primarily obsessional obsessive-compulsive disorder. Her physical examination was insignificant and organic causes were ruled out. Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) total score

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was 24/40. Diagnosis of Juvenile Obsessive-Compulsive Disorder was made. Parents refused for their daughter to take any medications considering it's "too early" for her to take drugs but agreed upon Exposure and Response Prevention (ERP) Therapy. Psycho education was given including the blockage of anxiety-provoking TV news channels to calm down the stress of nosophobia and mysophobia. Frequent phone calling to her classmates has helped. Eating together with family members and therapy targeting family accommodation has improved her symptoms after 4 weeks.

Discussion

This case describes the role of pandemic in initiation and unmasking the obsessive-compulsive symptoms in vulnerable children having family history of OCD. Furthermore it highlights the role of "media accommodation" in children with OCD. In reaction to the recent pandemic, WHO has recommended public hygiene initiatives and sought to increase public awareness about wearing mask, washing hands frequently, and the practicing of proper physical distancing measures. But on the other hand this media campaign is causing tremendous distress in patients with OCD and it strengthens the obsession of being dirty. Excessive fear of contracting infectious disease and fear of dying with it are the basis of compulsions [5]. The phenomenon of schools under lockdown for such a long period has been experienced by children and adolescent for the first time. A huge number of psychiatric patients are unable to seek mental health care due to limited public transport, overload of hospitals with COVID-19 positive and suspected patients. Moreover patients avoid visiting psychiatric clinic due to fear of being contract Coronavirus from health care professionals. Obsessive-compulsive disorder has strong genetic predisposition. Children having family history of obsessive-compulsive disorder are prone to show rituals in response of COVID-19 crisis, thus help us to get early diagnosis of obsessive-compulsive disorder. Family accommodation denotes to means to

aid a relative with obsessive-compulsive disorder by engaging in the performance of rituals, alteration of daily routines or avoidance of anxiety-inducing circumstances [6]. Therapy of children with OCD must target the family accommodation.

Conclusion

This case report outlines the psychological impact of COVID-19 and how COVID-19 is exposing the hidden psychiatric symptoms in children. The diagnosis and treatment of pediatric OCD cases usually offer demanding assignments. Additional research is required to establish other probable mental health outcomes of the present-day COVID-19 pandemic.

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