SCUPsyc

# Harm-Related OCD

OCD & Body-Focused Repetitive Behaviors

**Harm-Related OCD** is the focus of this educational guide. Obsessive-compulsive and related concerns can involve unwanted thoughts, images, urges, repetitive behaviors, mental rituals, or body-focused habits that feel difficult to resist. Temporary relief can reinforce the cycle and gradually consume more time or attention. A symptom list cannot confirm a diagnosis: context, duration, severity, development, physical health, medication, substance use, and functional impact all matter.

## Common patterns people may report

• recurrent unwanted thoughts, images, doubts, or urges

• repetitive checking, cleaning, ordering, counting, reviewing, or reassurance seeking

• mental rituals such as repeating phrases, reviewing memories, or neutralizing thoughts

• distress when things feel uncertain, incomplete, contaminated, unsafe, or morally wrong

• repetitive hair pulling, skin picking, or other body-focused behaviors

• time lost to rituals, avoidance, concealment, or recovery from repetitive behaviors

• shame or fear about the meaning of intrusive thoughts

• difficulty stopping even when the person recognizes the pattern is excessive or unhelpful

## How it can affect everyday life

Depending on the person, these concerns may affect sleep, concentration, confidence, work or study performance, relationships, social activity, self-care, decision-making, or willingness to enter situations that feel uncertain. The level of distress and impairment is often more informative than any single symptom.

## A useful first question

Instead of asking only 'Do I have this condition?', ask: What is happening, how often, for how long, in which situations, what does it stop me from doing, and what has already been tried? This produces information that is much more useful in a professional consultation.

# What to notice before seeking help

• the trigger or intrusive thought

• the ritual or response that follows

• short-term relief and how long it lasts

• time spent each day

• avoidance and reassurance patterns

• skin, hair, or physical damage from repetitive behaviors

## What else can look similar?

Psychological symptoms can overlap with sleep deprivation, medication effects, substance use, hormonal changes, pain, neurological or other medical conditions, and major life stress. A responsible assessment considers alternatives rather than assuming one explanation from an online checklist.

## When professional assessment becomes especially important

• symptoms persist, intensify, or repeatedly return

• work, study, relationships, sleep, self-care, or daily functioning are significantly affected

• avoidance or coping behaviors are shrinking daily life

• there are safety concerns, self-harm thoughts, severe agitation, hallucinations, confusion, or inability to care for basic needs

• physical symptoms are new, severe, rapidly changing, or have not had appropriate medical evaluation

## Urgent situations

SCUPsyc consultations are not emergency services. If there is immediate danger, suicidal intent, severe confusion, rapidly worsening psychosis or mania, inability to care for basic needs, serious withdrawal symptoms, or a medical emergency, contact local emergency services or an appropriate in-person medical service now.

## What a SCUPsyc consultation can help with

A consultation can help organize the problem, identify patterns and triggers, clarify what information matters, provide psychoeducation, and outline sensible next steps. It can also help you decide what questions to take to a locally licensed clinician. It does not guarantee a diagnosis, prescription, medical certificate, or emergency treatment.

# Prepare for a useful consultation

• Write a short timeline: when the concern began and what changed around that time.

• List the 3-5 symptoms or situations causing the most difficulty.

• Note sleep, stress, medication, substance use, recent illness, and major life events that may matter.

• Describe what you have already tried and what helped or made things worse.

• Choose one practical goal for the consultation: clarity, next-step planning, coping options, or deciding what type of local assessment is appropriate.

## Choose the support format

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| **Written Consultation - $49** | Structured review of the information you submit, a clear written response, psychoeducational context, practical next steps, and guidance on follow-up. | **Book $49** |
| **60-Minute Phone - $96** | A focused one-hour conversation to map the concern, clarify priorities, discuss patterns and options, and create a practical next-step plan. | **Book $96** |
| **60-Minute Zoom - $196** | A one-hour live video consultation for people who prefer face-to-face interaction, deeper discussion, and real-time clarification. | **Book $196** |

## Important boundaries

This guide and SCUPsyc's consultation services are educational and supportive. They are not a substitute for emergency care, a full diagnostic examination, medical testing, medication management, or treatment by a professional who is licensed and legally authorized to practice where the client is located. Availability and scope of remote services may vary by jurisdiction.

## Authoritative starting points for further reading

World Health Organization: Mental disorders fact sheets and mental health resources
National Institute of Mental Health: Health Topics and public fact sheets
NHS: Mental health conditions and symptom guidance

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