

Obsessive-Compulsive Spectrum Disorders: Refining the Research Agenda for *DSM-V*

edited by Eric Hollander, MD; Joseph Zohar, MD; Paul J. Sirovataka, MS; and Darrel A. Regier, MD, MPH. American Psychiatric Publishing, Washington, DC, 2011, 233 pages, \$65.00 (paper).

“Why me?” I wondered when I received this book to review. I have neither special interest nor special expertise in psychiatric nosology—I’m still stuck on *DSM-III* and earlier on neurosis versus psychosis versus character disorders and am still mourning the loss of diagnosing by defense mechanisms and other ephemera. And, worse yet, this is an edited work that publishes the proceedings from a research planning conference for *DSM-5* titled “Obsessive-Compulsive Spectrum Behavior Disorders: Refining the Research Agenda for *DSM-V*,” and almost all of its chapters were already published in 2 journal issues (the May 2007 issue of *CNS Spectrums* in 2007 and the November 2009 issue of *Psychiatry Research*). However, old wine in new bottles may present an opportunity, and that certainly proved true for this book. This work was intended as a separate research planning initiative to inform revisions for *DSM-5* and included representatives from the American Psychiatric Institute for Research and Education, the World Health Organization, and the National Institutes of Health. The contributors are acknowledged diagnostic experts in their respective areas of expertise.

As most readers anticipate, our current categorical diagnostic system will very likely undergo some major revisions in *DSM-5*. Although it is unlikely that it will become entirely or even mostly dimensional, it is clear that *DSM-5* will not be our ultimate *DSM* classification—nor should it be. As we learn more about the genetics of many of our entities and, even more, as we tease out the relevant endophenotypes, we will become increasingly closer to diagnosing psychiatric disorders etiologically. This small volume is not, however, a diatribe to hasten the process. The chapters are measured and balanced, and the focus is heuristic—an attempt to think about some of the common elements that cut across the diagnostic divide and see if there are new ways to conceptualize some of the entities we currently separate with such apparent certitude. The broad canvas of obsessive-compulsive disorders and their heretofore believed-to-be-unrelated cousins is a model starting place for examining spectrum disorders.

The book begins with a comprehensive introductory chapter by Hollander et al, which provides both background and an overview of what will follow. It is followed by “Obsessive-Compulsive Disorder: Boundary Issues,” by Fineberg et al, which reviews overlaps and commonalities among obsessive-compulsive disorder (OCD), schizophrenia, generalized anxiety disorder, social anxiety disorder, panic disorder, and major depressive disorder. The chapter also discusses OCD versus addictive, hypochondriacal, body dysmorphic, and grooming disorders; Tourette’s disorder; and Axis II and III disorders. In addition, the position that OCD itself warrants separation from the other anxiety disorders on numerous grounds is considered.

Chapter 2, by Phillips and Kay, reviews commonalities and differences among OCD and body dysmorphic and eating disorders. In the third chapter, Ferrao et al compare the biology, phenomenology, and treatment response among Tourette’s disorder, trichotillomania, and OCD. In Chapter 4, Potenza et al present a similar analysis for impulse-control disorders (intermittent explosive disorder and pathological gambling) compared to OCD. Chapter 5, on symptom dimensions in OCD (by Leckman et al), presents both a dimensional approach and a quantitative method to assess various phenotypic traits employing a 4-factor model of OCD (chapter 5). The genetics and familial factors of OCD are addressed by Nico et al in Chapter 6. Hollander and colleagues, in Chapter 7, discuss autism and Parkinson’s disease—2 “neurologic” disorders. (Is not the debate of “neurologic” versus “psychiatric” disorders yet another

example of categorical versus spectrum disorders—ie, splitters versus lumpers?) Both autism and Parkinson’s disease have many features in common with OCD. The authors cite the occasionally seen phenomenon of punding, for example, in which some Parkinson’s disease patients engage in behaviors that may closely resemble the repetitive features typical of OCD and also appear to simultaneously reduce their anxiety levels! Boulougouris et al, in Chapter 8, discuss animal parallels to obsessive-compulsive spectrum disorders such as acral-licking, tail-chasing, and hair-pulling.

The final chapter, by Matsunaga et al, reviews some of the sparse data regarding cross-national and ethnic issues in relation to obsessive-compulsive spectrum disorders.

In each chapter, I found myself surprised by how many striking similarities and parallels exist across the rigid boundaries embedded in my categorical psyche. Most of the chapters contain excellent tables, and the references provided for each are extensive and authoritative. All of the chapters are excellent—with a remarkable consistency and clarity—providing evidence of careful editing. I recommend the book to all mental health professionals.

Howard S. Sudak, MD
HSudak@afsp.org

Author affiliation: Department of Psychiatry, University of Pennsylvania School of Medicine, Philadelphia. **Potential conflicts of interest:** None reported.
doi:10.4088/JCP.11bk07130
© Copyright 2011 Physicians Postgraduate Press, Inc.