

Cognitive-Behavioral Therapy for OCD

David A. Clark. New York: Guilford Press (www.guilford.com). 2004, 324 pp., \$38.00 (hardcover).

This comprehensive volume critically examines contemporary cognitive and behavioral theory, research, and treatment of Obsessive Compulsive Disorder (OCD). Following an overview of diagnosis, psychopathology, and phenomenology of OCD, the first half of the book reviews theoretical models of etiology and maintenance of symptoms. Related hypotheses and empirical data which support (or fail to support) each model are discussed. Examples include cognitive appraisal theories: Salkovskis's (1985, 1999) inflated responsibility model; Rachman's (1997, 1998, 2003) misinterpretation of significance theory; and the work of the Obsessive Compulsive Cognitions Working Group (OCCWG, 1997, 2001, 2003). The OCCWG developed and validated two scales which are now "gold standard" measures of dysfunctional appraisals (Interpretation of Intrusions Inventory) and assumptions (Obsessive Beliefs Questionnaire) characteristic of this disorder. In Chapter 7, Dr. Clark builds upon previous research in his Cognitive Control Theory of Obsessions. This model proposes that an important factor in "persistence of obsessions" is the presence of faulty misinterpretations of mental control over unwanted intrusive thoughts that arise from the perceived negative consequences associated with failed thought control" (p. 136).

Chapters 8 through 12 describe assessment and cognitive behavioral treatment (CBT) interventions derived from the theoretical models reviewed. Validated scales, individualized self-monitoring forms, and rating scales for idiographic assessment of symptoms are discussed. A variety of cognitive and behavioral interventions are illustrated with case examples, sample therapeutic questions, and patient handouts.

In the concluding chapter 13, Dr. Clark reviews the empirical status of CBT treatment for obsessions and compulsions. Cognitive behavior therapy with the essential procedures of exposure and response prevention (ERP) is the empirically demonstrated treatment of choice for OCD. Although behavioral models/interventions are essential, these are limited for many cases. Important clinical questions require further research: which cognitive strategies improve the efficacy of ERP; what cognitive changes occur in cognitive therapy and ERP; what are the predictors of long term maintenance of change in symptoms and related dysfunctional beliefs? Given the heterogeneity of this disorder, clinical research is needed to further develop and examine specialized CBT approaches for OCD subtypes. Research to identify therapeutic ingredients and mechanisms of change during/following specialized treatment approaches is needed.

In the preface to his book, Dr. Clark stated: "Written with a scientist-practitioner orientation, it assumes that psychological treatment of OCD will be effective only if it is theoretically guided and empirically verified" (p. viii). I think Dr. Clark achieved this aim in his outstanding volume. Dr. Clark's informative, thought-provoking book is a must read for students, as well as experts, interested in learning more about this complex and difficult to treat disorder.

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