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PHENOMENOLOGICAL CHARACTERISATION OF HIGH-RISK POPULATION FOR OBSESSIVE-COMPULSIVE DISORDER (OCD), COMPARATIVE STUDY OF CLINICAL, NEUROPSYCHOLOGICAL AND DYSFUNCTIONAL BELIEFS OF PARENTS AND THEIR OFFSPRING

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Introduction: Obsessive Compulsive Disorder (OCD) is a disease affecting 1-3% of the population, with a chronic course and partial response to available treatments. The age of onset of OCD has a bimodal distribution, with a first peak in childhood. A high percentage of these patients (40%) continue to present symptoms in adulthood.

The higher prevalence of OCD in first-degree relatives of obsessive patients in relation to relatives of healthy controls, and the higher percentage of OCD in parents of patients with an early onset of the disease, guides a subgroup of patients with a higher genetic load for the disorder.

Family studies show that there is a higher frequency of OCD diagnoses in first-degree relatives of patients with OCD than in relatives of controls or in the general population. It has also been recognized that in cases with an early onset of the disease, the percentage of OCD in parents is higher, which would indicate that there is a group of patients with more familial OCD. Despite this, in the literature, to our knowledge, there are no studies in high-risk populations for OCD, such as studying the children and adolescents of adult patients with OCD. **Aims:** Characterization of a cohort of children and adolescents at high risk of developing Obsessive Compulsive Disorder and their affected parents with diagnosis of severe OCD.

Methodology: Sociodemographic variables, prevalence of mental disorders, neuropsychological performance with the Rey Osterrieth Complex Figure (ROCF) and dysfunctional beliefs with the Obsessional Beliefs Questionnaire (OBQ-44) were collected in children and adolescents at high risk of OCD and their affected parents. Statistical analysis methods: clinical, sociodemographic, neuropsychological and cognitive variables were compared between the different subgroups of the sample using the X² test for categorical variables and Mann-Whitney U test for quantitative variables.

Results: Eighteen families and 23 children were examined. The mean age of the children was 17.4 ± 8.27 and 34.8% were female. Four children had current OCD, 2 Attention deficit disorder and hyperactivity, 1 patient with major depressive episode and 2 with anxiety disorder. The mean age of the first symptoms of children diagnosed with OCD in our sample was 10 years. Children diagnosed with OCD showed a worse organization of the ROCF related to the rest of the children. Parents of children with OCD presented higher scores in the perfectionism, importance and control of thoughts and responsibility dimensions of the OBQ, compared to the rest of the parents.

Conclusions: Parents of children with OCD presented higher scores in the perfectionism, importance and control of thoughts and responsibility dimensions of the OBQ, compared to the rest of the parents. The prevalence of OCD in at-risk population is 17%, confirming the importance of early diagnosis programs to improve the treatment and prognosis of patients.

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