Exploring Family Factors in Pediatric Obsessive-Compulsive Disorder and Psychiatric Outpatient Controls

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Background

Consideration of family factors is critical in the context of pediatric psychiatric illness.

Family functioning impairment (FFI) has been well characterized in pediatric obsessive-compulsive disorder (OCD), with profound impacts on family routines, socio-occupational factors and emotional responses.

Methodology

Data

- Family Input Tool at BCCH (n=1221, years 2019-2023)
- OCD registry of the Provincial OCD Program (n=192, years 2011-2020)

Predictors of Interest:

- Patient demographics, psychiatric illness (OCD vs. non-OCD), medical history
- Patient’s family environment
- Family’s psychiatric history

Outcome Measures:

- 21-item Family Functioning Impairment Scale (modified from the validated OCD Family Functioning Scale)
- 3-item PTCD Scale (modified from the validated Distress Tolerance Scale)

Statistical analysis:

- Multivariable linear regression models: family-related outcome score regressed on clinical predictors and covariates

This project has been approved by the UBC Research Ethics Board

Discussion & Conclusion

Our results identified the following patient populations who experience increased family functioning impairment:

- Youths referred to the OCD clinic, compared to other clinics combined
  - Highlights OCD’s unique presentation with extensive family accommodation and symptom involvement
- Youths with parental and/or sibling history of behavioral-developmental-psychiatric disorders
- Youths with family financial struggles
- Youths with history of traumatic incident(s)

Our findings could help inform targeted interventions, treatment strategies and social supports that are catered to the unique circumstances of the youth patients and their families.

Proposed Study

Rationale:

There remains a need to characterize how FFI and PTCD in OCD compare to that experienced in families coping with other youth psychiatric conditions.

Objectives:

1. To compare FFI in youths referred to the OCD clinic relative to other psychiatry clinics at The British Columbia Children’s Hospital (BCCH) in Vancouver, Canada
2. To compare PTCD between OCD and non-OCD cohorts
3. To explore correlates of mental illness-related FFI and PTCD

In pediatric OCD, poor parental tolerance of child’s distress (PTCD) and accommodation behaviors are associated with increased symptom severity and treatment resistance.

Results

Figure 1. Family functioning impairment score by (A) OCD status and (B) referral clinic; * indicates p < .05

Figure 2. Family functioning impairment score by patient and family characteristics; * indicates p < .05