

HOARDING: WHEN SAVING GETS OUT OF CONTROL

By Ginger E. Blume, Ph.D.

Growing up, most of us are taught the value of saving: saving money, saving items we might need in the future, saving special collections of things like coins, dolls, rare books, etc. However, sometimes, the desire to save goes awry. There are people who develop an illness where they must save items that have no purpose or value such as old newspapers and magazines, lists, old notes, ties for garbage bags, strings, bottle caps, socks without a mate, etc. In fact, approximately 600,000 to 1.2 million people suffer from a form of Obsessive Compulsive Disorder, called Compulsive Hoarding. This illness can literally invade a person's life, crowding them out of their living space and their life.

Family research suggests that compulsive hoarding is a genetic disorder. Hoarders have a higher than average likelihood of suffering from social phobias, personality disorders, and pathological grooming disorders such as skin-picking, nail-biting, and trichotillomania (hair pulling). Anxiety and depression is a common co-existing illness. I would describe Compulsive Hoarding as "the acquisition of and inability to discard worthless items even though they appear (to others) to have no significant value." One might see hoarding behavior as a symptom of some other disorders, including schizophrenia, dementia, eating disorders, autism, etc. However, hoarding is most commonly found in people with the diagnosis of OCD.

Individuals with compulsive hoarding oftentimes struggle with indecisiveness and perfectionism, procrastination, difficulty organizing tasks, and avoidance. For instance, by compulsively saving, they avoid having to decide whether to discard something. This also helps them lower their anxiety about possibly making a mistake, as well as reduce their fears of being caught unprepared and hence, not perfect. Hoarders are attempting to cope with their biggest fear: the fear of losing important items that might be needed later. They over-estimate the possible negative repercussions of such a loss and then over-compensate by holding onto everything, "just in case." The compulsive saving is an attempt to manage overwhelming anxiety associated with their fears.

While hoarding is a form of Obsessive Compulsive Disorder, it is not as easily treated as other types of OCD. Many OCD symptoms respond very positively to the newer forms of anti-depressant medications (SRI's), such as Prozac, Celexa, Lexapro, Paxil, Zoloff or to Anafranil. However, people with the primary problem of compulsive hoarding have a fairly poor response, in general, to these typical SRI anti-depressants. If adequate trials of SRI's have failed, there are other medications that can be helpful that a doctor can prescribe. Studies are finding that anti-anxiety drugs, stimulant medications, and atypical antipsychotic medications can be considered with SRI's fail to provide relief. To date, the only type of treatment that has been found to be broadly effective for hoarding is Cognitive Behavioral Therapy (CBT). Medications are frequently also used to help treat the depression and anxiety, even though it may not effectively eliminate the actual hoarding compulsion. CBT helps the patient re-evaluate his fears and learn to manage anxiety in other ways besides giving into the compulsion to hoard.

In New England, a local psychiatric hospital, The Institute of Living, provides intensive treatment programs for people suffering from OCD who have not found relief from traditional weekly psychotherapy. There are other excellent intensive programs located in the Boston area.

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