



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

Anxiety and Obsessive Compulsive Disorders Clinic

Clinic/Program Director: Chris Bedosky, PhD
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W.O. Walker Building Suite 1155A
10524 Euclid Ave
Cleveland, OH 44106

Treatment Providers:

Chris Bedosky, PhD
Felipe Amunategui, PhD
Molly McVoy, MD

Payment Options:

Self-pay

Populations Served:

Adults
Adolescents
Children

Treatment Strategies Offered:

Cognitive Behavioral Therapy (CBT)
Exposure and Response Prevention (ERP)
Group Therapy
Prescribe Medication

Areas of Specialty (in addition to OCD in general):

Body Dysmorphic Disorder (BDD)
Skin Picking (Excoriation Disorder)
Tics/Tourettes
Violent/Sexual Obsessions

Summary of our services:

The Anxiety and Obsessive Compulsive Disorders Clinic opened in 2011. The OCD intensive treatment program is staffed by the program director Chris Bedosky, PhD, and Felipe Amunategui, PhD, a psychologist who uses CBT to address OCD and co-morbid disorders. The Center's medical director is Molly McVoy, MD, a board-certified adult, child, and adolescent psychiatrist. . Because University Hospitals/Case Medical Center is a teaching institution, there are also several child and adolescent psychiatry fellows who work with the program.

Our intensive treatment program is designed to help individuals who are unable to attend school due to their anxiety or OCD spectrum disorder. We work to get the student—whether they're a kindergartener or a graduate student—back into school and ready to learn. . All of the interventions and medications used are based on current best practices as recommended by leaders in the field. We take a patient-centered approach to treatment and understand that not everyone is ready to start on page one the first day of treatment. We also understand that the goals of our patients come first, making it our goal to develop a treatment plan that honors and respects the goals of each individual patient.

Treatment Planning Process

Treatment planning occurs after assessment and addresses the needs of the patient and the severity of the impairment. Severity of symptoms and impairment is measured using reliable and valid instruments and is assessed at regular intervals.

Recommendations for traditional or intensive treatment are made based on the assessment. Treatment is begun after the patient (plus parents or significant others) has been educated about the disorder and the treatment staff – along with the patient –determine that he or she is ready. For all patients, the following order of treatment is used: Assessment, Education, Exposure, Cognitive Work, and Relapse Prevention. Case review and treatment planning takes place weekly with treatment staff. All medications are prescribed after consultation with the medical director and the treatment team.

Core Treatment Components

The core treatment components of our program are exposure and response prevention therapy (ERP), comprehensive behavioral intervention for tics (CBIT), and habit reversal training (HRT), all of which fall under a larger cognitive behavior therapy (CBT) approach. Group therapy is offered to parents of children with anxiety disorders. Individual therapy is modified to address the needs of the patient and the patient's readiness for treatment. Medications are prescribed as needed to support the primary behavioral component and to treat comorbid conditions as necessary. The intensive program provides ERP in a controlled environment allowing the patient to experience effective exposures and response prevention with time for anxiety to diminish before leaving the office. Most sessions are scheduled for 90 minutes at least three times a week with exposures and response prevention as homework. Session frequency and length can be adjusted to the needs of the patient.

Parents, Family Members, Friends, Teachers, etc. Involvement

Family members receive psychoeducational support and instruction on how to help their child, sibling, or significant other achieve success in treatment. Parents are welcome to join the

anxiety parent support group which provides parent training and education about anxiety disorders and common co-morbid disorders. An important part of our program is the education of school teachers, administrators, medical residents, and fellows.

Treatment of Co-Morbid Disorders

The Anxiety and Obsessive Compulsive Disorders Clinic sees patients who have a primary diagnosis of an anxiety disorder or one of the following obsessive compulsive spectrum disorders: body focused repetitive behaviors (for example, hair-pulling or skin picking), as well as Tics, Tourette's, and body dysmorphic disorder. We do not currently work with individuals with hoarding disorder.

Individual Therapy

During the intensive treatment program, patients usually meet with their primary therapist 3 times per week for at least 90 minutes. This is to allow for review of homework and at least one complete ERP session followed by new homework assignments. If medications have been prescribed, the patient will meet with their psychiatrist as needed.

Length of Stay

There is no set time period for the patient's treatment. The length of the intensive treatment is determined by the patient's needs. Four weeks is adequate in most cases.

“Census” (i.e., the maximum number of clients seen at any given time)

The census for this program is 6.