

Obsessive-Compulsive Foundation

Obsessive Compulsive Hoarding

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Hoarding is a little studied and not very well understood behavior. It involves the acquisition of and failure to discard possessions that appear to be useless or of limited value. The behavior is quite common, and many people who hoard possessions do not suffer from a disorder.

However, when this behavior becomes severe, it can cause significant distress and impairment. **Hoarding behavior becomes clinically significant when it creates sufficient clutter so that parts of one's home cannot be used for their intended purpose.** The problems caused by hoarding include safety and health threats, as well as interpersonal and even legal conflicts. Navigating a cluttered house can be dangerous, especially for older people or those with limited mobility.

Excessive clutter is frequently associated with increased risk of fire and difficulty exiting the home due to blocked doorways and windows. Because adequate cleaning of cluttered homes is difficult, if not impossible, allergies and respiratory disorders can be exacerbated by hoarding behavior.

In some cases, saving rotten food or contaminated food containers poses additional health-related concerns. In addition to these concerns, the extreme clutter often associated with hoarding frequently creates interpersonal conflict with those living in the home and may result in social isolation.

Disorganization observed in the homes of people with this problem creates financial difficulties because finding and paying bills is frequently a problem. Such chaotic living conditions can create significant generalized distress as well.

Is hoarding a symptom of OCD?

Twenty to thirty percent of people diagnosed with OCD report hoarding as a major symptom. However, hoarding is associated with other disorders as well, such as anorexia nervosa, post-traumatic stress disorder (PTSD), dysphoria, dementia, and obsessive compulsive personality disorder (OCPD), for which it is one of the diagnostic criteria.

In the mid 1970s, researchers suggested a syndrome of behaviors in the elderly that included hoarding, self-neglect and neglect of immediate surroundings. It was named **Diogenes Syndrome** after a 4th century BC Athenian Cynic who rejected all domestic comforts.

Most often, however, hoarding is a symptom of obsessive compulsive disorder.

Whether hoarding in the context of OCD differs from hoarding in the context of the other disorders just described is unknown. In fact, recently investigators have suggested that many patients thought to have Diogenes Syndrome actually have undiagnosed OCD.

Sometimes hoarding appears in conjunction with other OCD symptoms, such as washing and checking fears and rituals, and sometimes it appears alone. It is not clear whether hoarding in the context of OCD is different from hoarding that is a part of OCPD. In the DSM-IV criteria for OCPD, hoarding is said to involve solely items without sentimental value, though this assumption appears to be erroneous.

Who typically has OCD hoarding?

People who are identified as having a problem with compulsive hoarding tend to be somewhat older than other OCD patients though most indicate that their hoarding behavior started when they were young. Consequently, the average age of onset for this problem is unknown. Nonpathological hoarding behavior may occur early in life and at some point, perhaps as possessions accumulate, the hoarding behavior becomes more difficult to control. It is not clear whether this problem affects women more than men.

Most studies of compulsive hoarding include more women than men, but this may merely be because women volunteer for such studies more often than men.

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