

# INTRUSIVE THOUGHTS

A NEWSLETTER FROM THE DEPARTMENT OF PSYCHIATRY'S OCD CARE TEAM

## HAPPY SUMMER & FALL!

Happy summer all! As we settle into the dog days of summer, returning to school and normal scheduling anxiety can creep in (or hit us with full force). This edition of the newsletter includes some stress management tips about returning to school, as well as a blurb on medication and a hierarchy for swallowing pills.

Updates for the team include: me, myself, receiving a title change to Clinical Director of the OCD Program; Stephanie Lehto taking on additional Student Resident Mental Health duties as Clinical Director of SRMH; Anna Korbel decreasing her time with our program, while starting a new position with our consultation liaison services; and in September we welcome our new social work intern, Katie Sinsko.

Our virtual training went wonderfully, and we are looking forward to doing another OCD/ERP training for community providers January 10th-13th 2023 (be on the look out for registration!). Our next big project to look out for will be at the virtual IOCDF conference November 4th-6th 2022. The following are the two sessions our team members will be presenting at:

Sunday November 6th at 12:30pm MST: Assessment and Treatment Considerations in Comorbid OCD and Psychosis-Dr. Rachel Davis, Dr. Michelle West, and Emily Hemendinger

Sunday November 6th at 1:45PM MST: Let's talk about sex, baby! And the importance of including sexuality in assessment and treatment-Emily Hemendinger and Dr. Rachel Davis

Both sessions will also be available on-demand once you register for the virtual conference.

Be well,  
Emily, Rachel, Stephanie, Scott, Abby, Kasey, Megan, and Anna



## OUR TEAM

*Dr. Rachel Davis MD - Medical Director and Psychiatrist*

*Emily Hemendinger LCSW, MPH, CPH – Clinical Director/Licensed Clinical Social Worker and DBS Coordinator*

*Dr. Stephanie Lehto PsyD – OCD Therapist/Licensed Psychologist*

*Dr. Megan Dery DO – Psychiatrist*

*Dr. Abigail Norouzinia PhD – OCD Therapist/Licensed Clinical Psychologist*

*Kasey Benedict LCSW -OCD Therapist/Licensed Clinical Social Worker*

*Anna Korbel LSW – Clinical Social Work Faculty Fellow/OCD Therapist*

*Dr. Scott Cypers – Licensed Psychologist/Therapist with Johnson Depression Center*

## GROUP OFFERINGS

*Mondays at 12pm - \*taking a break\*  
For students (all ages above 18 years old) with OCD and related disorders*

*Mondays at 4pm (monthly)  
Intro to ERP - for new group members*

*Mondays at 5pm  
For adults ages 18+ with OCD and related disorders*

*Tuesdays at 5pm (waitlist)  
For adults ages 18+ with OCD and related disorders*

*Wednesdays at 5pm (waitlist)  
For adults ages 18+ with OCD and related disorders*

*Thursdays at 4pm (waitlist)  
For adults ages 18+ with OCD and related disorders*

*Fridays at 4pm (waitlist)  
For adolescents 13-17 years old with OCD and related disorders*

*We do have a waitlist for individual and group therapy, please reach out to be added to our waitlist and/or send you other referrals.*

*Are you a clinician who wants to know more about OCD and ERP? We offer trainings, consultations, and supervisions!*

**[CLICK HERE FOR MORE RESOURCES ON OCD AND ERP FOR CLINICIANS AND PATIENTS](#)**



## STAFF SPOTLIGHT: DR. ABBY NOROUZINIA

Abby Norouzinia, PhD, is a Licensed Clinical Psychologist with the OCD Treatment Team and Helen and Arthur E. Johnson Depression Center at the University of Colorado Anschutz School of Medicine. She completed her Master's Degree and Doctor of Philosophy in Clinical Psychology at the University of Missouri – Kansas City. Following this, she went on to complete her Clinical Internship at the Denver VA Medical Center where she subsequently completed a Postdoctoral Fellowship with an emphasis on the assessment and treatment of PTSD and trauma. Dr. Norouzinia utilizes compassion, humor, and a collaborative style to help her clients address difficult issues (OCD, phobias, anxiety, trauma, etc.) with the use of evidence-based treatments (PE, CPT, ERP, IFS, EFT, CBT, etc.). Her goal is for clients to better understand the function behind their presenting concerns, learn how to effectively address them, and build compassion for themselves and others along the way. When she isn't working, Dr. Norouzinia enjoys spending time in the sunshine, being with friends, trying new restaurants, and off-roading.

# MANAGING BACK TO SCHOOL JITTERS

The start of a school year can be a challenging time for children and parents with transitions from one grade to another, new teachers, bullying, social pressure, continued changes related to the pandemic, and much more. And, your child just had a summer full of possibly avoiding this stuff and not dealing with things that can make them anxious. So, as school approaches, you might notice both in yourself and your children that stress levels start to run higher, which can typically lead to exacerbations in OCD/anxiety and other stress related behaviors.

Here are some tips and tricks to help minimize the distress of back to school and hopefully help these waves from coming.

Think about which might work for you and your family?

## **Before school starts...**

- Talk about the transition back to school. Explore with your children their excitements as well as fears. Try to help your children work through their fears and get excited for the upcoming wonderful parts of the new school year.
- Think through what challenges your child will face or fears your child expresses about the start of the new school year. Is it writing essays, making new friends, or answering questions out loud? Any of those types of challenges begin to rehearse now or teach them tricks on ways to succeed.
- Establish fun traditions around the start of school. Do something fun the night or days before school starts, such as a special once a year desert. Make it a time they look forward to every year.
- Create a “school year” schedule that includes consistent bedtimes, wake up times, homework schedule and meal-times. Start that routine at least one week before the school year. That way there will be less elements to adjust to at the start of school.
- Homework load – make a plan for where and when homework will be done. Is it always done at the kitchen table right after school, or is there a desk your child uses and homework time will be after dinner? Stick to a schedule so it’s always part of the evening routine.
- Discuss with your children the amount and type of after school activities during the school year. Help your children set realistic expectations that allow them to be successful both in this activity and school commitments such as homework.
- Go through expectations ahead of time about getting dressed, eating breakfast, and appropriate grooming so that everyone gets out the door on time. Build in rewards and potential consequences before hand for following through on those routines. Visual checklists around these routines for the morning and evening can really set your child and family up for success.
- Get organized!
  - Establish a family calendar where all after school events and important assignment due dates are easy to spot.
  - Prepare school bags and clothes the night before, arrange books and school supplies on shelves or in boxes or drawers
  - Help your child come up with an organization system to use during the school year. Begin to practice that organization system prior to the start of school

# LET'S TALK ABOUT... RELATIONSHIP OCD

Obsessive Compulsive Disorder (OCD) has been portrayed as a disorder that involves cleanliness and order, which does encompass the symptoms some people face. This does not, however, accurately describe many other ways OCD can present which can leave some people feeling alone in their battle against OCD. Let's take a look at Relationship OCD.

Relationship OCD, or ROCD, is a sub-type of OCD that focuses on one's relationship with intrusive doubts and fears around whether the relationship is "right" or one's partner is the "right one" that are neutralized through compulsive checking (of one's feelings, the relationship, partner, etc.) or reassurance seeking about the relationship (Fernandez et al., 2021). You may be thinking "well, that's normal!" and you'd be right! It is normal to have doubts in your relationship, especially when considering a big life change like marriage or a move across the country. ROCD is very good at sneaking in and causing doubts that get in the way of being able to enjoy time with your partner, even doing smaller things like going to the movies or sitting on the couch. ROCD tells you that you NEED TO KNOW RIGHT NOW if your partner is "the one" or that there's no one better out there, and ultimately prevents you from experiencing the relationship.

So... what do you do? Do you have a thought like "do I actually love Tony?" and review everything you like and dislike about Tony until you have certainty that you're making the exact right decision to stay or leave the relationship? Well, if you have ROCD you probably do something like that. That sounds exhausting, and probably only helps for a short period of time. Instead, what would it be like to accept that maybe you don't know, but for right now you're going to be present in your relationship and enjoy the time you have together? I don't know about you, but that sounds more fun to me.

And, as a human being, I want to recognize that relationships are confusing and a lot of hard work. Lots of relationships just don't work out, and that's okay! I'd rather take that power myself instead of letting OCD tell me what to do.



# HIERARCHY FOR SWALLOWING PILLS

A lot of people find it very challenging to swallow pills. A fear of choking can often create a large amount of anxiety around swallowing. Using a hierarchy to gradually expose individuals to swallowing larger pills can help individuals work through the anxiety.

## Sample Hierarchy:



The sample hierarchy gradually works up from a small sprinkle to swallowing larger sprinkles, small pills and then capsules. Other options include small candies like nerds, mini M & Ms, and regular M&Ms, etc.

### Steps to Swallowing for Exposure:

1. Place the sprinkle, tablet or capsule on middle of tongue.
2. Keep tongue flat
3. Take sip of water
4. Tilt head back slightly
5. Swallow



Practice swallowing each sized "pill" 3-4 times before moving to the next size up. Try not to chew the sprinkle/candy in the process. If you have a hard time with one sized pill take a break and try again at a different time. Deep breathing can help if you start to feel anxious.

Aubrey, K (2017). How to help a child with...pill swallowing. Dr. Kate Aubrey. <http://drkateaubrey.com/wp-content/uploads/2016/02/Pill-Swallowing-Brochure.pdf>

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# WHAT WE HAVE BEEN UP TO THIS SUMMER:



Helping our clinical director, Emily, face her fears of peacocks by doing an exposure wearing peacock dresses for the annual IOCDF conference.



IOCDF Conference 2022



Supporting our medical director, Dr. Rachel Davis, a living organ donor, at the Donor Dash 5k Run/Walk hosted by the Donor Alliance.