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Abstract

COMBINED THERAPEUTIC INTERVENTION IN GENERALISED ANXIETY DISORDER OCCURRING IN COMORBIDITY WITH OBSESSIVE – COMPULSIVE PERSONALITY DISORDER

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Introduction: Due to the fact that comorbidity associations involve a complex and even interdisciplinary therapeutic plan, monotherapy is not always the best choice for treating Generalised Anxiety Disorder (GAD) occurring in comorbidity with Obsessive – Compulsive Personality Disorder (OCPD). Considering the negative social, interpersonal and emotional implications generated by this type of comorbidity, a combined therapeutic approach – psychological and pharmacotherapeutic – is needed; this would produce effects at bio – psycho – social levels, generating adaptive cognitive and behavioural models in these patients.

Purpose of the study: Demonstrating the therapeutic efficiency of the combined treatment involving Cognitive – Behavioural Therapy (CBT) associated with Escitalopram 10 mg/day in treating anxiety occurring within GAD in comorbidity with OCPD, as well as confirming certain positive changes produced within the personality dimensions of *Extraversion, Agreeability* and *Emotional Stability* as a result of the combined therapeutic intervention.

Material and method: The results in this research were obtained over the course of three years, beginning with October 2009 and until October 2012. A number of 32 patients were included in the study; 18 patients were female (M= 36.83 years old) and 14 were males (M= 34.64 years old), the general age average of the entire sample being 35.9 years old. All patients had been diagnosed with GAD occurring comorbidly with OCPD. From a psychometric point of view, the following were used: the Structured Clinical interview SCID – II, the Hamilton Anxiety Rating Scale, as well as the DECAS Personality Inventory. The therapeutic team consisted of 4 psychiatrists and 4 clinical psychologists, having a general clinical experience of 10.12 years, their experience in Cognitive – Behavioural therapy amounting to 7.75 years.

Results: Pre – treatment, the scores recorded on the Hamilton anxiety scale were M = 21.31, SD= 4.45, while post – treatment, the anxiety score had M= 7.66, SD= 4.27, with a difference of 13.66. The 95% confidence interval for this difference ranged from 12.33 to 14.99. The pre – treatment and post – treatment score means differed in a strong statistically significant manner: t = 29.95, DF=31, where $p<0.001$. It is relevant that the moderate anxiety level from the pre-treatment stage clinically remitted in the post – treatment stage. Thus, the combined therapeutic intervention can in this case be considered as extremely efficient ($p<0.001$) in treating GAD comorbid with OCPD.

In the case of the dimension of *Openness*, the pre-treatment and post – treatment score means did not differ in a statistically significant manner: t = - .17, DF = 31, CI 95% from – .78 to .65. For *Extraversion*, pre – treatment and post – treatment score means differed in a statistically significant manner, where t = - 3.38, DF = 31, $p<0,01$, CI 95% from – 3.38 to – 0.81. The scores for *Extraversion* showed a positive modification, which reveals that CBT associated with Escitalopram produces positive changes ($p<0.01$), a fact which indicates improvements in the social framework of these patients. In the case of *Conscientiousness,* score means did not differ in a statistically significant manner: t = - .17, DF = 31, CI 95% ranges from – .78 to .65, therefore co-therapy does not produce alterations in the *Conscientiousness* dimension. With *Agreeability*, score means differed in a statistically significant manner: t = - 2.90, DF = 31, where $p<0.01$, CI 95% ranges from – 3.24 to – 0.57. The *Agreeability* dimension scores also showed a positive change, so co-therapy produces positive modifications in this dimension ($p<0.01$), which indicates a higher degree of tolerance in interpersonal relationships. In the case of *Emotional stability*, pre-treatment and post-treatment score means differed in a strong statistically significant manner: t = - 7.09, DF = 31, where $p<0.001$, CI 95% ranges from – 6.36 to -3.52. *Emotional stability* changed positively, therefore co-therapy produces positive modifications in this dimension ($p<0.001$), which reveals a better capacity for emotion control, as well as a lack of worries and negativity in the patients, who adopt a rational approach to life events.

There is a moderate pre-treatment correlation (r. = .43, $p<0.05$) and a strong post-treatment correlation (r =.53, $p<0.01$), between *Agreeability* and *Emotional stability*.

Conclusions: Based on the results obtained, we can consider the combined therapy consisting of CBT and psychopharmacology as being extremely efficient in treating anxiety occurring in the area of the association between GAD and OCPD. Combined therapeutic intervention produces changes in the sphere of three personality dimensions: *Extraversion*, *Agreeability* and *Emotional Stability*. *Openness* and *Conscientiousness* suffer a statistically insignificant

change. There is an association between Agreeability and Emotional Stability, as these alter in tandem after the therapeutic intervention. One can state that: the two dimensions condition each other; the technique used has favourable therapeutic effects on the association of two dimensions. All these changes denote greater sociability, better interpersonal relationships, a better emotional control and in conclusion an improvement in the patients' quality of life.

Key words: Cognitive – Behavioural Therapy, Generalised Anxiety Disorder, Obsessive – Compulsive Personality Disorder, comorbidity, the dimensional sphere of personality.