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**DURATION OF UNTREATED ILLNESS, DURATION OF ILLNESS AND SEVERITY OF ILLNESS IN OBSESSIVE COMPULSIVE DISORDER AND MAIN SUBTYPES**

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**Introduction:** Obsessive-compulsive disorder (OCD) symptoms are remarkably diverse, as regards both clinical presentation and severity<sup>1</sup>. Studies are conflicting about whether any specific phenotype of OCD is easier to treat or likely to benefit from a particular treatment. Duration of untreated illness (DUI) represents a modifiable parameter, whose reduction may positively influence the outcome and long-term course of specific psychiatric disorders<sup>2</sup>. The aim of this study was to evaluate possible differences concerning severity, duration of illness (DI) and DUI among OCD subtypes in a sample of OCD patients.

**Methods:** 114 OCD outpatients were recruited and assessed using the Y-BOCS. The main OCD phenotypes were identified through the Y-BOCS-Symptom Checklist. A one-way ANOVA test was performed to compare DUI, DI and Y-BOCS scores in the sample.

**Results:** Subjects were categorized into 4 clinical phenotypes: aggressive/checking (n=31), contamination/cleaning (n=37), symmetry/ordering (n=32) and multiple phenotypes (n=14). DUI, DI and YBOCS scores were found significantly higher in aggressive/checking subgroup, compared to other subgroups (One Way ANOVA:  $F=3.58$   $p<0.01$ ;  $F=3.07$   $p<0.01$ ;  $F=4.390$   $p<0.01$ ). Furthermore, the mean DUI of the whole OCD sample, ( $87.35 \pm 110.75$  months) resulted approximately half of the mean DI ( $172.2 \pm 132.36$  months).

**Conclusions:** DUI and DI resulted significantly higher in the aggressive/checking subgroup, compared to the other subgroups. YBOCS scores resulted significantly higher in the aggressive/checking subgroup compared to the others, showing that longer DUI and DI may condition a worse clinical outcome in this subgroup. Of note, within the total sample half of the whole DI was spent untreated.