

Research Paper

Comparison of Cognitive Errors and Rumination in Obsessive-Compulsive and Social Phobia Disorders

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ABSTRACT

Objectives The present research was conducted to compare cognitive errors and rumination in patients with obsessive-compulsive and social phobia disorders.

Methods The research design was cross-sectional post event descriptive survey. The research participants included 30 patients with social phobia disorder and 30 patients with obsessive-compulsive disorder who were aged between 15 and 50 years in Zanjan city, who were available samples. They were selected on the basis of psychiatrist diagnosis and structured diagnostic interviews (SCID-I) and (SCID-II), and the inclusion and exclusion criteria. Cognitive errors questionnaire and ruminative response style questionnaire were used to measure the variables.

Results The results, analyzed using multivariate analysis of variance, indicated that there is a significant difference with regard to the components of cognitive error between the patients belonging to the two groups (obsessive-compulsive and social phobia disorders) ($P \leq 0.05$). There was no significant difference between the mean scores of rumination components in groups' $P \leq 0.05$ level.

Conclusion According to the research findings, cognitive errors and rumination play important roles in obsessive-compulsive and social phobia disorders as experienced by both the groups. However, the patients with obsessive-compulsive disorder had more cognitive errors compared to the patients with social phobia disorder. The results confirm the equal role of rumination in the psychopathology of these two groups.

Key words:

Obsessive compulsive disorder, Social phobia disorder, Cognitive errors, Rumination

Extended Abstract

1. Introduction

Anxiety disorders are one of the most common disorders with anxiety excitement playing a central role. Cognitive theorists believe that the ways of thinking make some people vulner-

able to anxiety disorders. This study was conducted to compare the cognitive errors and mental ruminations in patients with obsessive-compulsive and social phobia disorders.

Patients with social phobia disorder and obsessive-compulsive disorder have more deficits in attentional control, have more symptoms of obsessive-compulsive disorder, and experience bouts of rumination, anxiety and depres-

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sion [18]. To the best of our knowledge, no research on the type of cognitive errors in patients with obsessive-compulsive disorder and social phobia has been conducted in Iran. Therefore, the aim of this study was to compare the content of mental ruminations and cognitive errors in patients with obsessive-compulsive disorder and social phobia in order to provide better treatment to the two groups of patients.

2. Methods

The research design is descriptive ex post facto and takes up the form of a cross-sectional study. The participants were 30 patients with obsessive-compulsive disorder and 30 patients with social phobia in the age group of 15-50 years in Zanjan City. The participants were selected in the form of Available Sampling and using the psychiatric diagnosis and structured diagnostic interviews (SCID-I) and (SCID-II). Inclusion criteria were being afflicted with either of the two clinical disorders, having a minimum degree of junior level at a secondary school, and being in the age range of 15-50 years. The exclusion criteria were having personality disorders, mental retardation, bipolar disorder, psychosis, and substance abuse. To measure variables, the Cognitive Errors Test and Ruminative Response Style Questionnaire were used. Data analysis was carried out using SPSS-18 software. In order to analyze the research hypotheses, parametric statistical methods were used. To study the differences between obsessive-compulsive disorder and social phobia groups in relation to the component of cognitive errors, multivariate variance analysis (MANOVA) was conducted.

3. Results

In conjunction with the demographic information relating to the groups under study, the average age of patients with obsessive-compulsive disorder and social phobia was 30.56 and 24.13, respectively. In general, 55% were female and 45% were male. The participants had attained education levels of under-diploma (21.7%), high school diploma (28.3%) and above high school diploma (50%). With regard to marital status, 58.3% were single, 36.7% were married and 5% were divorced. Despite a significant difference in some demographic variables among the two groups, the results of analysis of covariance showed that these differences had no contribution to the results obtained in this study.

To test the normal distribution of scores for cognitive errors and mental ruminations in the two groups, the Kolmogorov-Smirnov test was used. The significance level (sig) for the values obtained in this test was higher than

0.05 for all the above factors.. Levine's test was used to test the homogeneity of variances for components of cognitive errors and mental ruminations in obsessive-compulsive disorder and social phobia groups. The significance level (Sig.) of statistics obtained from this test was higher than 0.05 for all variables. Therefore, assuming similarity of the discussed variables, the variances in both the groups was accepted. According to the assumptions of parametric statistics in this research, including the relativity of variables' scale, the normal distribution and variances of the same variables were observed in the two groups.

4. Discussion and Conclusion

The results showed that there is a significant difference between the components of all-or-nothing thinking, hasty conclusions, labeling others, ignoring positive affairs, catastrophizing and sensory argument between both the groups of patients. Mental filter components scores, extreme generalization, and the Dos and personalization in patients with obsessive-compulsive disorder are more than that of social phobia patients, but this difference is not significant. Patients with social phobia had fewer cognitive errors compared to patients with obsessive-compulsive disorder. This is Social skills in social phobia disorder plays an important role. Sometimes people due to defects in these skills, failure in their social relationships and environment which does not give good feedback.. These shortcomings play a more important role with respect to social skills than cognitive errors [27].

The results showed that there was no significant difference in the mean of components such as distraction, pondering and sinking in rumination among the two groups of patients. The mean of components such as distraction and sinking in rumination was higher in patients with obsessive-compulsive disorder than that of the social phobia group, but according to MANOVA test results, this difference was not statistically significant.

According to the results of this study, which showed that there is no significant difference between patients with obsessive-compulsive disorder and social phobia in ruminations, therefore in explaining these findings it can said that anxiety is a prominent feature in both, and given that these two disorders in the same category in DSM-IV, their diagnostic features are somewhat similar . Rumination is maladaptive component in all anxiety disorders but it is predicted that this can discriminate non-patient group from social phobia and Obsessive-Compulsive Disorder groups.

In general, our results showed that there was a significant difference between patients belonging to the two

groups when the component of cognitive error was taken into account ($P<0.05$). There was no significant difference between the mean scores of the groups as far as the component of rumination was concerned ($P<0.05$).

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Conflict of Interest

The authors declared no conflicts of interest.