

Excessive guilt and guilt sensitivity differentially augment the cognitive-behavioral model of obsessive-compulsive symptoms across symptom dimensions

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INTRO

- Prior research on the cognitive-behavioral model of obsessive-compulsive disorder has implicated three primary domains of obsessive beliefs in the development and maintenance of obsessions and compulsions:¹⁻³
 - Overestimation of threat or inflated responsibility (RT)
 - Importance and need to control intrusive thoughts (ICT)
 - Perfectionism and intolerance of uncertainty (PC)
- These beliefs, however, fail to account for all of the variability in OCD symptoms (OCS), indicating the need for additional research to improve our cognitive-behavioral conceptualization.
- Guilt has been associated with OCD symptom severity, with theoretical models suggesting it may play a central role to the maintenance of some clinical presentations in OCD.⁴⁻⁶
- Still, it remains unclear to extent to which guilt-related constructs contribute to specific OCS dimensions, and explain variance in symptoms above and beyond known correlates.
- The present study thus investigated whether excessive guilt (EG) and guilt sensitivity (GS) were differentially associated with the OCS dimensions and if guilt constructs enhanced the explanatory power of the CBT model.

METHODS

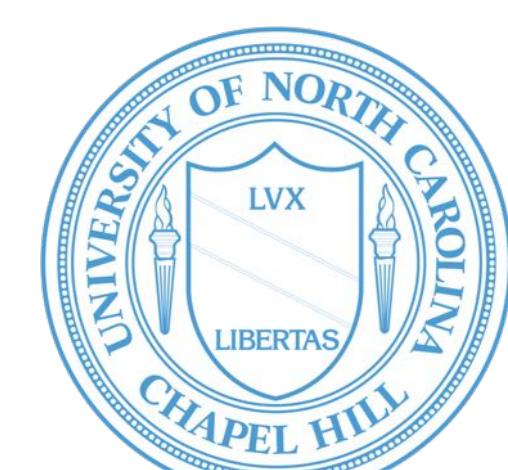
- This study examined the association between OCS, obsessive-beliefs, and guilt-related constructs (*excessive guilt, guilt sensitivity*) in a large sample of undergraduates (N = 272).
 - See supplementary materials for additional details on sample.
- Zero-order correlations and stepwise linear regression analyses were conducted to examine our study aims.
- Participants completed self-report measures, including the Dimensional Obsessive-Compulsive Scale (DOCS),⁷ Depression, Anxiety, and Stress Scale (DASS),⁸ Obsessive Beliefs Questionnaire (OBQ),⁹ Guilt Sensitivity Index (GSI),¹⁰ and Inappropriate and Excessive Guilt Scale (IEGS).¹¹

RESULTS

- Both guilt measures were significantly associated with all DOCS subscales, with the GSQ most strongly linked with unacceptable thoughts and IEGS with responsibility for harm OCS.
- Guilt sensitivity significantly predicted DOCS contamination and unacceptable thoughts, but not responsibility for harm or symmetry.
- Inappropriate and excessive guilt emerged as a significant predictor of only DOCS contamination and responsibility for harm symptoms.

DISCUSSION

- Excessive guilt and guilt sensitivity were associated with all OCS dimensions. However, guilt constructs only added to the predictive utility of the cognitive-behavioral model for OCD symptoms relevant to contamination and unacceptable thoughts.
- Limitations include the use a cross-sectional design with only self-report survey methods and a convenience sample of undergraduate students.
- Further research to examine the implications of guilt may prove useful for enhancing our understanding and treatment of OCD.



Findings suggest that excessive guilt and guilt sensitivity are associated with all obsessive-compulsive dimensions. Future research may explore expanding the cognitive-behavioral model of OCS to include guilt.



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Figure 1. EG and GS regressions relating to DOCS dimensions

Variable	R ²	R ²	Beta	t	p
<i>Predicting DOCS-Responsibility for Harm</i>					
Full Model	0.233	.041			>.000
IEGS			.241	3.756	.000
OBQ - ICT			-.090	-1.460	.146
OBQ - PC			.013	.176	.861
OBQ - RT			.343	4.642	.000
<i>Predicting DOCS-Symmetry</i>					
Full Model	0.160	.009			.093
IEGS			.113	1.688	.093
OBQ - ICT			-.021	-.331	.741
OBQ - PC			.120	1.605	.110
OBQ - RT			.250	3.232	.001
<i>Predicting DOCS- Unacceptable Thoughts</i>					
Full Model	0.186	.014			.035
IEGS			.140	2.115	.035
OBQ - ICT			.181	2.846	.005
OBQ - PC			.028	.376	.707
OBQ - RT			.205	2.687	.008
<i>Predicting DOCS-Contamination</i>					
Full Model	0.119	.026			.006
IEGS			.192	2.793	.006
OBQ - ICT			.027	-.110	.683
OBQ - PC			-.008	2.493	.913
OBQ - RT			.198	2.793	.013

Figure 2. Correlations of GSQ and IEGS relating to DOCS dimensional scale

	GSQ	IEGS
DOCS - CONTAM	.297*	.294*
DOCS - HARM	.241*	.394*
DOCS - SYM	.270*	.290*
DOCS - THTS	.337*	.304*



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Supplementary Table 1. Socio-demographic sample characteristics

	<i>M (SD)</i>	<i>Range</i>
	<i>N</i>	<i>%</i>
Age	19.87 (1.80)	18 - 34
Gender		
Male	71	26.1
Female	201	73.9
Unknown	1	1
Other	0	0
Race & Ethnicity		
African American or Black	24	8.8
American Indian or Alaska Native	2	0.7
Asian American or Asian	39	14.3
Hispanic or Latino	9	3.3
Middle Eastern	2	0.7
Multiracial	5	1.8
White or Caucasian	188	69.1
Other	2	0.7
Unknown	1	0.4

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