

# 難治性強迫性障害に対する 非薬物的身体治療の試み： 精神科医の立場から

黒木 俊秀

九州大学大学院人間環境学研究院実践臨床心理学専攻

## Application of non-pharmacological physical treatment to treatment-refractory obsessive-compulsive disorder: A critical viewpoint from a psychiatrist

Toshihide Kuroki

Department of Clinical Psychology Practice

Kyushu University Graduate School of Human Environmental Sciences

### Abstract

Currently, non-pharmacological physical treatments such as deep brain stimulation (DBS) have been investigated as an experimental therapy for treatment-refractory obsessive-compulsive disorder (OCD). The aim of this review is to consider the clinical issues concerning the application of DBS to refractory OCD from the viewpoint of a psychiatrist. Despite a growing body of evidence for the critical role of the frontal-subcortical circuits (OCD loop) in the pathogenesis of OCD, the optimal targets as well as the precise mechanism of action of DBS still remain unclear. Taking several clinical issues (e.g. definition and determinants of treatment-resistance, natural course and assessment instruments) into account, it seems difficult to determine the best time to refer a treatment-resistant OCD patient to a neurosurgeon for DBS. Because OCD has recently been considered as a spectrum of multiple, overlapping syndromes rather than a unitary disease entity, decision on the application of DBS to refractory OCD should also require assessment of its heterogeneous condition. DBS thus seems still only an intervention and operation for the brain that is a “Black Box”, which yields both optimism and pessimism of psychiatrists. It is likely to provoke a crisis of the identity of psychiatry when there emerges a potent and innovative physical treatment for refractory psychiatric disorder.

### Key words

obsessive-compulsive disorder (OCD), deep brain stimulation (DBS), OCD loop, treatment-resistance, heterogeneity

*Rinsho Hyoka (Clinical Evaluation)* 2013 ; 41 : 241-52.