

# TitleRefractory Obsessive Compulsive Disorders:<br/>Conventional Treatments and Deep Brain StimulationAgencyHAS, Haute Autorité de santé/French National Authority for Health<br/>2, avenue du Stade de France, FR-93218 Saint-Denis La Plaine Cedex France;<br/>Tel: +33 1 55 93 71 88, Fax: +33 1 55 93 74 35; www.has-sante.frReferenceANAES report. September 2005. www.anaes.fr/anaes/Publications.nsf/wEdition/AT\_<br/>LFAL-6G6EXS?OpenDocument&Retour=&Chapitre=ID2

## Aim

- To review treatments for obsessive compulsive disorders (OCD) and identify refractory conditions that may require deep brain stimulation (DBS)
- To assess the feasibility of DBS (used experimentally since 2002 in very severely disabled subjects).

# Conclusions and results

- (i) *Pharmacological and psychotherapeutic treatments for OCD.* A meta-analysis and clinical trials with a good level of evidence have emphasized the efficacy of serotonin recapture inhibitors (SRI) and cognitive behavioral treatment (CBT). However, outcome is unsatisfactory in one-third of patients.
- (ii) *Description of DBS:* Electrodes are inserted into a target area of the brain located using a stereotactic frame.
- (iii) Clinical trial of DBS: One randomized controlled trial (RCT) (8 patients, evidence level 2 according to the HAS classification) and 5 case series (9 patients, evidence level 4) were identified. Different targets were used in these patients.
- (iv) *Efficacy of DBS:* Clinical scores were improved by about 82% postoperatively (6/8 patients improved in the RCT and 8/9 in the case series). Improvement was maintained at 1 year in the RCT.
- (v) Safety of DBS: Complications included brain hemorrhage during the procedure, and weight gain and mood disorders during the postoperative period.
- (vi) Benefit/risk ratio of DBS: DBS is still an emerging technology. The benefit/risk ratio cannot be assessed because of an insufficient number of comparative trials of a good level of evidence and because of a lack of long-term followup. Although few patients have been treated, results are encouraging and suggest that DBS might soon become a treatment modality for refractory patients.

# Methods

Several databases were searched over the period 1984-2004 (MEDLINE, EMBASE, Pascal, Cochrane Library, National Guideline Clearinghouse, HTA Database) for relevant articles in English or French. Studies were selected on the basis of their level of evidence and design quality. The critical literature review was submitted to a multidisciplinary working group of 21 experts and to 21 peer reviewers recruited from learned societies (chosen fields: psychiatry, neurology, neurosurgery).

## Further research/reviews required

The results of the French multicenter trial on DBS for OCD and that of international trials should be available next year. The most suitable target for DBS needs to be identified.