

COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES

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DANGER IDEATION REDUCTION THERAPY (DIRT)

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<u>Definition</u>: Cognitive-restructuring and attention focussing aiming to decrease dangerrelated expectancies concerning contamination and disease in obsessive-compulsive washers.

<u>Elements</u>: DIRT tries to change unrealistic thoughts about illness to realistic ones by: <u>cognitive restructuring</u> with <u>probability</u>-of-illness <u>estimation</u> before and after <u>giving</u> detailed <u>corrective information</u> concerning the immune system, disease rates, and usual risks people take without becoming ill, shows filmed interviews with cleaners etc who touch dirt and brief reports about scientific contamination experiments; daily <u>attention</u> exercises without thoughts intruding by normal breathing (neither slow nor rapid) while focusing on a series of numbers while breathing in and focusing on the word 'relax' while breathing out - no instructions are given about fear of or exposure to contamination.

<u>Related procedures</u>: Attention focussing (training), cognitive restructuring, diary-keeping, homework, probability estimation, rational emotive therapy

<u>Application</u>: Taught individually or in groups to obsessive-compulsive washers.

<u>1st Use</u>? Jones MK, Menzies RG (1997) Danger Ideation Reduction Therapy (DIRT): preliminary findings with three obsessive-compulsive washers. Behaviour Research and Therapy, 35, 955-960.

Reference:

Hoekstra R (1989) Treatment of OCD with rational-emotive therapy. Paper (describing probability-of-catastrophe-estimation task) to 1st World Congress of Cognitive Therapy, Oxford: 28 June-2 July, 1989.

Case Illustration

Over 6 years, for fear of contamination Mary aged 34 had avoided using public transport or toilets, shaking anyone's hand, touching garbage or raw meat, and contact with pets and pet owners. She showered 6 times a day and washed her hands with antiseptic for 5 mins after touching anything 'contaminated' and before handling food. Her therapist said incorrect beliefs about contamination caused the problem and asked her to *keep a diary* (*homework*) of thoughts and beliefs about dirt and illness.

Mary felt 99% certain that touching her garbage bin would cause vomiting and diarrhoea. With her therapist she analysed the steps for this to occur (bacteria on the bin, transfer to her hand, entering her body, immune failure) and estimated the probability for each step. Multiplied together these yielded an illness probability of .014% compared to her initial estimate of 99%. She was asked to apply such *probability estimation* to one new situation a week. Mary was shown a 10-min video of an interview with a house cleaner who mentioned that she typically cleaned homes in which pets lived so cleaning up pet hair was part of her work, and she used gloves only to prevent hand irritation from bleach, and on finishing washed only briefly with any soap available.

Discussion noted that pet- and pet-shop owners, vets and cleaners were not unduly ill (giving corrective information). The therapist gave Mary a 1-page microbiology report that undue washing can cause skin cracks allowing in infection, and a 2-page report of an experimenter who with one hand touched a cat, scoop for a cat litter tray, and garbage bin, after which no significant differences were found for pathogens on that hand, compared to the other, control, hand. Mary was helped to challenge excessive risk estimates for tasks, and asked her to read and copy the summary daily for 15 min to make her thoughts realistic (cognitive restructuring).

From early on Mary was asked to practise *attention focussing (training)* for two 10-minute sessions daily with eyes closed: during her 1st breath in she had to focus on the number '1' and during her 1st breath out to say 'relax', during her 2nd breath in to focus on '2' and during her 2nd breath out to say 'relax', and so on until on her 10th breath in she focussed on '10' and during her 10th breath out said 'relax'. She repeated this 10-breath cycle over and over for 10 minutes and was asked to, between sessions, practise these 10-min focusing-*homework* sessions twice a day in gradually noisier environments with her eyes open.

After 12 one-hour individual DIRT sessions weekly and at 6-month follow-up Mary's contamination fears and washing reduced markedly. Without fear she took the bus to shops, used public toilets and touched garbage bins, and stroked pets which friends brought to her home.