

## Obsessive-Compulsive Disorder as a part of Prodromal Schizophrenia

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**P**rodromal schizophrenia presents with a wide variety of psychiatric symptoms including obsessive-compulsive disorder (OCD) or obsessive-compulsive symptoms (OCS). However, this differentiation between a sole diagnosis of OCD and prodromal schizophrenia seems challenging in some settings. We present a sixteen-year-old male with six-months history of recurrent intrusive images and fearfulness, in addition to decreased socialization. He was managed as a case of prodromal schizophrenia and was treated with antipsychotics. His obsessions decreased but he continued to exhibit negative schizophrenia within two years of follow-up. Acknowledging the diversity of prodromal schizophrenia presentations rather than treating symptoms as a cross-sectional diagnosis (especially in high-risk population for psychosis) is crucial for a better management.

**Discussion:** This case illustrates the complexity of the diagnosis of an officially established disorder that is

OCD with well-defined criteria and controversial labeling prodromal schizophrenia with several presentations including OCD. The impact of OCD/OCS among prodromal schizophrenia or at-risk people for psychosis was revealed in some studies by having a higher clinical impairment, more depressive symptoms and suicidality.

**Conclusion:** Our patient was managed as a case of prodromal schizophrenia rather than solely OCD based on the associated features (aloofness, progressive social and academic decline, slowed psychomotor functions and dysprosody). Positive family history of schizophrenia in addition to praecox feeling further confirmed the patient's condition. The following two years of the patient's course revealed the necessity of considering the full detailed presentation of prodromal schizophrenia rather than the spot diagnosis of OCD to benefit from early intervention psychosis services and minimize the clinical deterioration.

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