

Emotional Dysregulation as a Factor in Obsessive-Compulsive Disorder: A Systematic Review

Desregulación Emocional Como Factor del Trastorno Obsesivo Compulsivo: Una Revisión Sistemática

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Summary

Obsessive-Compulsive Disorder (OCD) is characterized by recurrent intrusive thoughts that generate repetitive behavioral or mental responses. This study describes the relationship between OCD and Emotional Dysregulation (ED), defined as the difficulty in adequately managing emotions, which constitutes a key factor in the severity of symptoms. Through a systematic review in Scopus, Web of Science, and Google Scholar, using the PRISMA method, 8 articles validated with STROBE and CONSORT were analyzed. The results highlight that the most common forms of EED in OCD include low emotional clarity, non-acceptance of emotions, impulsive behaviors due to poor emotional management, and emotional avoidance. It is concluded that the lack of emotional clarity and acceptance are the main factors that aggravate obsessions and compulsions. Therefore, it is recommended to address EED as a central element in psychotherapeutic interventions to treat OCD.

Keywords: Obsessive Compulsive Disorder, Emotional Regulation, Emotional Dysregulation

Resumen

El Trastorno Obsesivo Compulsivo (TOC) se caracteriza por pensamientos intrusivos recurrentes que generan respuestas conductuales o mentales repetitivas. Este estudio describe la relación entre el TOC y la Desregulación Emocional (DsE), definida como la dificultad para gestionar adecuadamente las emociones, y que constituye un factor clave en la severidad de los síntomas. A través de una revisión sistemática en Scopus, Web of Science y Google Scholar, utilizando el método PRISMA, se analizaron 8 artículos validados con STROBE y CONSORT. Los resultados destacan que las formas más comunes de DsE en el TOC incluyen la poca claridad emocional, no aceptación de las emociones, conductas impulsivas por mal manejo emocional y evitación emocional. Se concluye que la falta de claridad y aceptación emocional son los principales factores que agravan las obsesiones y compulsiones. Por ello, se recomienda abordar la DsE como un elemento central en las intervenciones psicoterapéuticas para tratar el TOC.

Palabras clave: Trastorno Obsesivo Compulsivo, Regulación Emocional, Desregulación Emocional

1. Introduction

Obsessive-Compulsive Disorder (OCD) is a chronic and debilitating mental illness characterized by obsessions (recurring intrusive thoughts, images, or impulses) and compulsions (repetitive mental or behavioral actions) that affect the well-being of those who suffer from it (American Psychiatric Association). Association, 2013). Obsessions may include immoral thoughts, contamination worries, or pathological self-doubt (Purdon, 2021). Compulsions seek to prevent a perceived disastrous outcome and may manifest in mental rituals or overt behaviors, such as hand-washing or constantly checking whether a door is locked (Sibrava et al., 2011). Severe OCD is a severe form of the disorder, characterized by frequent symptoms that can occupy from 4 hours a day to every waking moment, negatively impacting a person's well-being (Huppert & Foa, 2005).

The global prevalence of OCD is 1% to 2%, making it the fourth most common mental disorder in Europe, with rates between 0.1% and 2.3% (Fawcett et al., 2020; Pampaloni et al., 2022). Women are at higher risk, with a rate of 1.5% versus 1.0% in men (Fawcett et al., 2020). The most frequent obsessions include fear of contamination, self-harm, obsessions with symmetry, and forbidden thoughts, while the most common compulsions are washing, constant checking, and avoidance of triggers (Veale & Roberts, 2014).

Emotional Regulation (ER) consists of the processes by which people influence their emotions, whether in their experience or expression, and can be activated consciously or unconsciously depending on goals or needs (Gross, 1999; Aldao et al., 2010). Gratz and Roemer (2004) highlight key dimensions of a healthy ER, such as emotional clarity, access to strategies, goal-oriented behaviors, emotional awareness, acceptance of emotions and impulse control. On the other hand, Emotional Dysregulation (ED) refers to the inability to manage emotions appropriately, leading

to maladaptive responses that affect psychological well-being. This phenomenon is related to difficulties in selecting emotion regulation strategies and to the severity of OCD symptoms (Aldao et al., 2010).

Psychotherapeutic work focused on emotional dysregulation (ED) in anxiety disorders and OCD has shown a positive impact on symptom remission and high adaptability to patient needs (Moral and Hervás, 2017). Emotional regulation strategies such as emotional awareness, emotional clarity, acceptance of emotions, impulse control, and goal-oriented behaviors are key to developing prevention and treatment programs (See et al., 2022).

First-line treatments combine Selective Serotonin Reuptake Inhibitors (SSRIs) with Cognitive Behavioral Therapy (CBT), particularly Exposure and Response Prevention (ERP), which has been shown to be highly effective in reducing symptoms (Del Casale et al., 2019; Pittenger and Bloch, 2014; Skapinakis et al., 2016; Öst et al., 2015). However, its implementation is limited due to practical constraints, lack of resources, and concerns about patients' fears of exposure and potential side effects (Colman et al., 2024).

2. Methodology

A systematic evaluation was carried out of the documents found on the scientific digital platforms Scopus, Web of Science, and Google Scholar, which were accessed through the Virtual Library of the Catholic University of Cuenca, introducing thesaurus nomenclature according to each platform, as shown in Table 1. The inclusion criteria for the articles were: a) they must have been published since 2018, b) they must be written in English or Spanish, c) they must use experimental or quasi-experimental methodology, d) they must use populations of all ages. The exclusion criteria were defined as: a) they must have limited access, b) they must be books, c) their content must not have the correlation analysis between DsE

or RE and OCD. Initially adding between the three databases, there was a total of 50 articles selected to analyze, after discarding those that were repeated or that were written in a language other than English or Spanish, a total of 37 articles were obtained, with this an exhaustive review of titles, contents and accessibility of each document was carried out, having at the end a total of 8 articles that were used for this study, the entire process mentioned above was carried out using the PRISMA Declaration Flowchart (Preferred Reporting Items for Systematic reviews and Meta- Analyses), which serves as a tool to promote quality, transparency and consistency in the presentation of findings from systematic review research, detailed in Figure 1. In addition to this, the methodological quality of the selected articles was analyzed by applying the STROBE Initiative Declaration “ Strengthening the Reporting of Observational studies in Epidemiology ”, which allowed us to recognize the elements necessary to measure the quality of selected articles and, likewise, the CONSORT Statement “ Consolidated” was used for this. Standards of Reporting Trials”, the results of which are shown in Table 3 and Table 4 respectively.

Table 1. Advanced search

Database	Thesaurus nomenclature
Web of Science	OCD (Topic) emotion regulation (Topic) treatment (Topic)
Scopus	(TITLE-ABS-KEY (ocd) AND TITLE-ABS-KEY (emotion AND regulation) AND TITLE-ABS-KEY (treatment)) AND PUBYEAR > 2017 AND PUBYEAR < 2025 AND (LIMIT-TO (LANGUAGE , “English”)) AND (LIMIT-TO (DOCTYPE , “ ar ”)) AND (LIMIT-TO (SUBJAREA , “NEUR”) OR LIMIT-TO (SUBJAREA , “PSYC”) OR LIMIT-TO (SUBJAREA , “MEDI”))

Google Scholar “OCD” AND “emotion regulation” AND “treatment”
without the words: “Meta analysis” “medicine”
“diagnosis” “psychiatry”

Note. Source: Martínez & Reivan (2025)

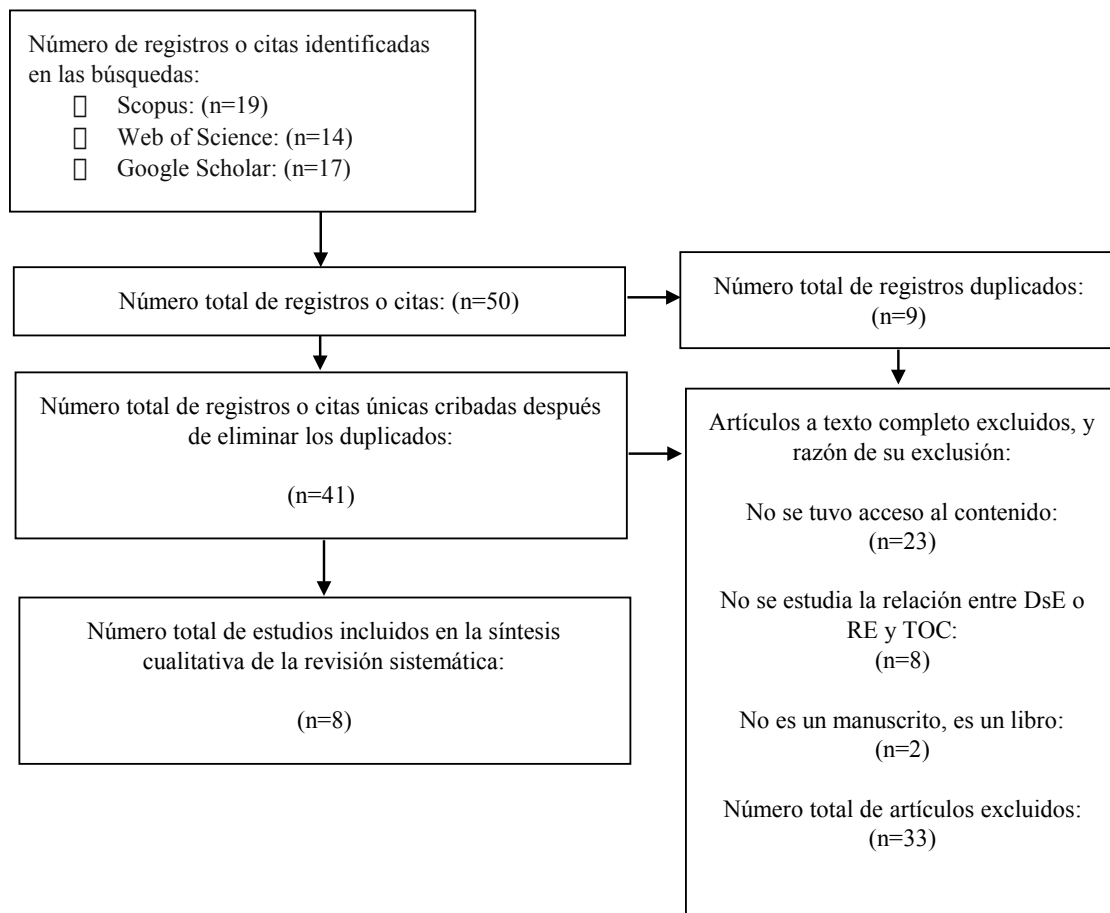


Figure 1. Flowchart of the different phases of the systematic review, based on Urrútia & Bonfill (2010). **Source:** Martínez & Reivan (2025).

Table 2. Assessment of the quality of the studies based on the STROBE checklist

STROBE score																			
Articles	Title and summary	Context/Basis	Goals	Study design	Context	Participants	Variables	Data sources/measures	Biases	Sample Size	Quantitative Variables	Statistical Methods	Participants	Descriptive data	Variable data	Main results	Other analyses	Key Results	Limitations
(Yap et al., 2018)	+	+	+	+	+	+	+	+	P	+	+	+	+	+	+	+	?	+	+
(Khosravani, et al., 2018)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	?	+	+
(Shameli et al., 2019)	+	+	+	+	+	+	P	?	+	+	+	?	+	+	P	+	?	+	?
(McKenzie et al., 2020)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	?
(McKenzie et al., 2020)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	?
(Eichholz et al., 2020)	+	+	+	+	+	+	+	+	?	+	+	+	+	+	+	+	+	+	?
(Ferreira et al., 2021)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	?
(Naji, et al., 2022)	+	+	+	+	+	+	?	+	?	+	+	+	P	?	+	+	?	+	?

(+) Green box = Submitted-reported, 1 pt; (P) Gray box = Partially submitted-reported, 0.5 pt; (?) White box = Not submitted-reported, 0 pts.

Note. Source: Martínez & Reivan (2025)

Table 3. Assessment of the quality of studies based on the CONSORT checklist

CONSORT Score																			
Articles	Qualification	Summary	Introduction 1	Introduction 2	Method 1	Method 2	Method 3	Method 4	Method 5	Method 6	Method 7	Method 8	Results 1	Results 2	Results 3	Discussion 1	Discussion 2	Discussion 3	Other information
(Yap et al., 2018)	?	+	+	+	P	+	?	+	+	?	P	+	+	+	+	+	?	+	?
(Khosravani , et al., 2018)	?	+	+	+	?	+	P	+	+	?	P	+	+	+	+	+	?	+	?
(Shameli et al., 2019)	?	+	+	+	P	+	?	+	+	?	P	?	+	?	+	?	?	+	+
(McKenzie et al., 2020)	?	+	+	+	P	+	P	+	+	?	P	+	+	+	+	+	?	+	?
(McKenzie et al., 2020)	?	+	+	+	P	+	?	+	+	?	P	+	+	+	+	+	?	+	+
(Eichholz et al., 2020)	?	+	+	+	P	+	?	+	+	?	P	+	+	+	+	+	?	+	?
(Ferreira et al., 2021)	?	+	+	+	P	+	?	+	+	?	P	+	+	+	+	+	?	+	+
(Naji , et al., 2022)	?	+	+	+	+	P	?	+	+	?	P	+	+	+	+	+	?	+	+

(+) Green box = Submitted-reported, 1 pt; (P) Gray box = Partially submitted-reported, 0.5 pt; (?) White box = Not submitted-reported, 0 pts.

Note. Source: Martínez & Reivan (2025)

5. Development

Below, in this section, the characteristics, factors analyzed and quality scores of each article reviewed are presented in Table 4:

Table 4. Selected articles, characteristics of the studies and factors analyzed:

No.	Reference	Study Features	Factors Analyzed			STROBE ptj MAX 22 pts	CONSORT ptj MAX 19 pts	
			OCD		DsE			
			Obsessions	Compulsions	Complex Factor	Characteristics		
1	"Emotion regulation difficulties in obsessive-compulsive disorder" (Yap et al., 2018)	Australia; N=365; experimental; Difficulties in Emotion Regulation Scale (DERS); Dimensional Obsessive-Compulsive Disorder Scale (DOCS); Yale-Brown Obsessions and Compulsions Scale (Y-BOCS).	Unacceptable thoughts; Responsibility; Symmetry; Pollution	Control rituals; Symmetry; Decontamination rituals	DsE causes an increase in the severity of symptoms .	DsE : Non-acceptance of emotions, inability to achieve goals when distressed, problems controlling impulses, limited access to ER strategies.	18.5	13
2	"Difficulties in emotion regulation and symptom dimensions in patients with obsessive-compulsive disorder" (Khosravani , et al., 2018)	Iran; N=160; quasi-experimental ; DERS; Y-BOCS; Obsessive-Compulsive Inventory-Revised (OCI-R)	Doubt; Washing concern; Obsession; Mental neutralization	Checking; Ordering; Washing and cleaning	DsE was a significant predictor of checking/doubting, obsession, mental neutralization, and ordering symptoms .	Non-acceptance of emotional responses, low emotional awareness, limited access to ER, non-acceptance of emotions	19	12
3	"The Effectiveness of Emotion-Focused Therapy on Emotion Regulation Styles and Severity of Obsessive -Compulsive Symptoms in Women with Obsessive -Compulsive Disorder" (Shameli et al., 2019)	Iran; N=24; quasi-experimental ; Emotion-Focused Therapy (EFT) Protocol	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	The results showed that there was a significant difference between the test and study groups in terms of concealment style and OCD severity after the intervention.	Decreased emotional awareness Maladaptive behaviors due to poor emotional management.	16	11
4	"Variability in emotion regulation in pediatric obsessive-compulsive disorder: Associations with symptom presentation and response to treatment" (McKenzie et al., 2020)	Australia; N=137; experimental; Child Behavior Checklist (CBCL)	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	DsE is related to internalizing and externalizing symptoms	Lack of emotional awareness Negative emotional responses	20	13.5

5	"Examining parent-report of Children's emotion regulation in pediatric OCD: Associations with symptom severity, externalizing behavior and family accommodation" (McKenzie et al., 2020)	Australia; N=76; experimental; CBCL	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	Lability/Negativity correlates positively and significantly with externalizing symptoms	Lack of emotional awareness Negative emotional responses	21	14
6	"Self-compassion and emotion regulation difficulties in obsessive-compulsive disorder" (Eichholz et al., 2020)	Germany; N=90; quasi-experimental; DERS; Self-Compassion Scale (SCS)	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	DsE was positively associated with increased severity of OCD symptoms	Low emotional awareness Emotional avoidance Non-acceptance of emotions Distress caused by emotional responses	19	13
7	"Stress Influences the Effect of Obsessive-Compulsive Symptoms on Emotion Regulation" (Ferreira et al., 2021)	Portugal; N=65; experimental; Emotional Regulation Questionnaire (ERQ)	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	Stress acts as an influencing factor on DsE, causing an increase in the severity of symptoms.	Emotional suppression	21	14
8	"Mediating Role of Difficulties in Emotion Regulation and Experimental Avoidance in the Relationship Between Attachment Styles and Severity of Relationship Obsessive-Compulsive Disorder Symptoms" (Naji, et al., 2022)	Iran; N=531; experimental; DERS; Relationship Obsessive-Compulsive Inventory (ROCI); Acceptance and Action Questionnaire II (AAQ-II);	Fear of contamination; Fear of aggression; Need for symmetry; Forbidden thoughts	Washing and cleaning; Checking; Reinforcing compulsions; Memory review; Avoiding triggers	DsE had a mediating role in attachment styles and symptom severity	Lack of emotional clarity, poor emotional management	16.5	14

Note. Source: Martínez & Reivan (2025)

In addition, the individual results analysis of each study was also carried out with its respective contribution, specifying the type of DsE or RE associated with the severity of the symptoms:

3.1. Results of the reviewed studies

3.1.1. Study 1

In this article authored by Yap et al. (2018), *Difficulties in Emotional Regulation in Obsessive-Compulsive Disorder*, whose objective was to examine the difficulties in ER and their implication in the severity of OCD symptoms, so two studies were carried out with different samples, the first with a community sample (n=306), and the second with a clinical sample (n=59). Difficulties in emotion regulation, especially the non-acceptance of emotions, problems of greater inability to achieve goals when distressed, problems controlling impulses and limited access to emotion regulation strategies when experiencing negative emotions, differentially affect the stages of identification, selection, application and supervision of emotion regulation in OCD, so the symptoms of this pathology are aggravated. Due to this, the importance of the role that ER has in predicting the severity of symptoms is recognized.

3.1.2. Study 2

The study by Khosravani et al. (2018) *Difficulties in Emotion Regulation and Symptom Dimensions in Patients with Obsessive-Compulsive Disorder*, counting the control group, the total population was 160 people, to whom Y-BOCS, OCI-R and DERS were applied. The results showed that the non-acceptance of emotional responses, limited access to emotion regulation strategies and difficulties in impulse control were positively related to the six symptomatic dimensions of OCD: washing, checking/doubting, obsessing, mental neutralizing, ordering and hoarding. Difficulties in carrying out goal-directed behaviors showed more significant and positive correlations with washing, obsessing, checking/doubting and ordering concerns. Lack of emotional awareness was positively associated with all six dimensions of OCD symptoms, except for ordering.

3.1.3, Study 3

Shameli et al. (2019) in their research, *The Effectiveness of Emotion-Focused Therapy on Emotion Regulation Styles and Severity of Obsessive-Compulsive Symptoms in Women with Obsessive-Compulsive Disorder*, aimed to analyze the effects of Emotion-Focused Therapy (EFT) on ER styles and the severity of obsessive-compulsive symptoms in women with OCD. For which, pre and post treatment, the OCI-R, Y-BOCKS and DERS instruments were used to a total population of 24 women, applying group therapy sessions lasting 90 minutes, held twice a week for 5 weeks. EFT develops internal control through its principles, which allowed patients to reduce their high levels of self-criticism and feelings of shame, causing their symptoms to decrease. Specifically, patients considered the use of the hiding style, which refers to people who manage or repress their emotions, as the main means of generating emotion regulation. This was because, thanks to the final direction of the treatment, practical solutions were sought, with the objective of replacing the usual obsessive-compulsive strategies, increasing in turn the levels of awareness and responsibility by reflecting on their own internal relationships.

3.1.4, Study 4

This study by McKenzie et al. (2020), *Variability in Emotion Regulation in Pediatric Obsessive-Compulsive Disorder: Associations with Symptom Presentation and Treatment Response*, explored whether variability in emotion regulation was associated with several clinical correlates of OCD and an attenuated response to treatment. Participants in this study were 137 youth between the ages of 7 and 17 years, with a primary diagnosis of OCD, who administered the ADIS-IV-P, CY-BOCS, BRIEF, CBCL, FAS-SR assessment instruments. A median split of responses to the BRIEF Baseline Emotional Control (EQ) index resulted in two groups of youth: those with relatively higher and those with poorer EQ. The results indicated that the group with a relatively lower EQ, that is, those who were

not aware of their emotions and therefore relapsed into more negative and intense emotional and behavioral responses, presented internalizing and externalizing symptoms, generating greater severity in terms of OCD symptoms, having a comorbid diagnosis of specific phobia, and more Family Accommodation (FA), which refers to the actions taken by the family nucleus to accommodate the needs of a member suffering from psychological difficulties, altering the usual dynamics. Three months after treatment, there were fewer young people who responded to treatment in the group with lower EQ than in the group with higher EQ; however, there were no significant differences in the remission of symptoms between the groups.

3.1.5, Study 5

The study by McKenzie et al. (2020), *Examining Children's Parent-Report of Emotion Regulation in Pediatric OCD: Associations with Symptom Severity, Externalizing Behavior, and Family Accommodation* examined parent-reports of children and adolescents with OCD, who analyzed the ER of 76 participants aged 7 to 17 years, in order to measure the relationships they had with this illness and PA and ER capacities. The Child Behavior Checklist was used for this. The results indicated that the parent-report showed that participants' lability/negativity was significantly and positively correlated with externalizing symptoms and PA, while adaptive ER was significantly and negatively correlated only with externalizing symptoms; furthermore, lability/negativity predicted externalizing symptoms, even when OCD severity was taken into account. Lability/negativity did not predict family adjustment after controlling for OCD severity and externalizing symptoms, however, it was a significant moderator of the relationship between OCD.

3.1.6, Study 6

The research conducted by Eichholz et al. (2019), *Self-Compassion and Difficulties in Emotional Regulation in Obsessive Compulsive Disorder*, studied the relationship of self-compassion, ER difficulties, obsessive beliefs and the severity of OCD symptoms in 90 patients who were administered self-report questionnaires, which were: DERS, Y-BOCS, OCCWG and SCS. The results of statistical analysis showed that the severity of symptoms and obsessive beliefs were negatively correlated with self-compassion, on the other hand, they were positively associated with DsE, in addition to this self-compassion showed a negative relationship with ER, concluding that specifically the low emotional awareness, avoidance of emotions, distress caused by emotional responses and non-acceptance of emotions, are those that predict the severity of OCD because they directly influence obsessive beliefs.

3.1.7, Study 7

For this article by Ferreira et al. (2021), *Stress Influences the Effect of Obsessive-Compulsive Symptoms on Emotion Regulation*, the effects of stress and obsessive-compulsive symptoms on ER are explored, carried out in a sample of 65 healthy individuals diagnosed with OCD, using self-report psychometric devices to measure stress levels through the Perceived Stress Scale (PSS-10), obsessive-compulsive symptoms through Y-BOCS and OCI-R, finally ER through reappraisal and emotion suppression skills with the use of the ERQ. Multiple regression and mediation analyses were applied to obtain the results, which indicated that increased reappraisal scores were associated with higher suppression scores; Furthermore, high stress levels predicted increased suppression scores and decreased reappraisal scores. Furthermore, reappraisal abilities resulted from a combination of a direct effect of obsessive-compulsive symptoms and an indirect effect of stress-mediated obsessive-compulsive symptoms. Therefore, it is concluded that the inclusion of stress management in

treatment models for OCD is important, as it directly affects ER, which consequently increases symptom severity.

3.1.8, Study 8

This article authored by Naji et al. (2022) *Mediating Role of Difficulties in Emotion Regulation and Experimental Avoidance in the Relationship between Attachment Styles and the Severity of Symptoms of Relationship Obsessive-Compulsive Disorder*, aims to determine the mediating role of difficulties in emotion regulation and avoidance of experimentation in the relationship between attachment styles and the severity of Relationship Obsessive-Compulsive Disorder (RCD), so 531 participants were selected for the application of reagents: ECR-R, DERS, AAQ-II, ROCI. The study model fit the data perfectly, and two variables of DsE and experimental avoidance had a mediating role in the relationship between attachment styles and RCD symptoms. Insecure attachment styles are associated with strategies of underregulation (disengagement from close others) and overregulation (exaggerated emotional expressions). These strategies and difficulties in regulating emotions, with a lack of emotional clarity and maladaptive behaviors caused by poor emotional management being key factors, can lead to an increase in compulsive behaviors in different domains of CDD.

4. Conclusions

There is a notable interest in the research community in the area of psychopathology regarding the relationship between DsE and OCD, highlighting its possible application for treatment and even as a complement when performing exposure therapy. In this work, this information has been analyzed and compiled to arrive at more convincing arguments in this regard, specifically when it comes to communicating the most common specific variables of DsE and ER.

Concluding that the DsE that is frequently evident are: Little emotional clarity, non-acceptance of emotions, behaviors driven by poor management of emotions and emotional avoidance, which constitute the most common specific factors that were found and that infer about the severity of OCD symptoms, mainly because they act on obsessions and compulsions, so it is important that this information be taken into account to reform and integrate new objectives in the different psychotherapeutic interventions.

Likewise, it is recommended that more research be incorporated to demonstrate the effectiveness of enhancing ER in people with OCD within psychotherapeutic processes and that the results be contrasted and validated.

5. Contribution of the authors

FM: Data collection, introduction, analysis of results, discussion, conclusions.

GR: Data collection, analysis of results, discussion, final review of the article.

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