A NETWORK PERSPECTIVE ON COMORBID DEPRESSION IN ADOLESCENTS WITH OCD

Payton J. Jones, Patrick Mair, Bradley C. Riemann, Beth L. Mugno, & Richard J. McNally
OCD & Depression

- Very common for those with OCD (62.7-78.2% lifetime; Millet et al., 2004)
- OCD generally comes first (Ricciardi & McNally, 1995)
- Associated with greater severity (Brown et al., 2015)
- Elevated suicide risk (Torres et al., 2011)
- Linked to obsessions, but not compulsions (Ricciardi & McNally, 1995; Besiroglu et al., 2007)
Common cause model

Network view

Nodes

Edges

Communities
Nodes
Edges
Communities
Relationships between symptoms
Symptoms
Disorders
Centrality

- **Strength**
Centrality
• Strength
• Betweenness
Centrality

- Strength
- Betweenness
- Closeness
Graphical LASSO (sparse partial correlations)

\[ \gamma = 0.3 \]
Conclusions

• Central symptoms
  – Obsessions, sadness, concentration problems

• Communities with bridges
  – Obsessions, guilt, sadness, concentration problems

• Concentration problems are unique
  • Two most common functional complaints (Piacentini et al., 2003):
    • Problems concentrating on schoolwork
    • Doing homework

• Networks and the future
Thank you for your attention!
Additional Resources

• Read the preprint: https://osf.io/preprints/psyarxiv/8d9kx
• Adding non-symptom nodes to networks:
  • https://osf.io/preprints/psyarxiv/sv58b/
  • https://osf.io/preprints/psyarxiv/mh3cf/
• ResearchGate: www.researchgate.net/profile/Payton_Jones
• Helpful network tutorials: http://psych-networks.com/tutorials/
• networktools R package: https://cran.r-project.org/web/packages/networktools/networktools.pdf