Hoarding Disorder

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1. Introduction

Hoarding disorder is characterized by difficulty in discarding possessions and persistent acquisition of objects. Accumulating and difficulty discarding is associated with subjective beliefs about instrumental, sentimental or intrinsic value of objects. Despite its significant impact on the individual, family and community, it had been a neglected clinical condition. It was classified as a distinct diagnostic entity in recent edition of DSM-5 among compulsive spectrum disorders. ¹

2. Definition

Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) defined Hoarding Disorder as the persistent difficulty discarding the possessions, regardless of their actual value. This difficulty is associated with perceived need to save the items and distress linked with discarding them. ²

3. Causes

Hoarding disorder can occur as a result of following causes-

1) Personal vulnerabilities: - Heredity, past experiences, personality traits and interpersonal difficulties. ¹ Genetic studies shows that 50% of patients suffering from hoarding had a relative with this disorder. ³
2) Difficulties in information processing: - impairment in attention, memory and decision making
3) Maladaptive cognitive content: - meaning and emotional attachment to possessions, dysfunctional beliefs which reinforce hoarding behavior.
4) Brain dysfunction or stressful life events
5) Positive and negative reinforcement associated with emotions (eg: pleasure in acquisition of things and discomfort associated with discarding). ¹

4. Sign and Symptoms

Hoarding can vary from mild to severe. Hoarding can seriously impact life of some patients and in some cases may not have much effect.

4.1 Sign and symptoms are as follows:

- Significant distress or problems functioning or keeping oneself and others safe in one’s home
- Conflicts and aggressive behavior with others who try to remove clutter from home

4.2 Reasons to accumulate items

- They believe these items will be needed at some point in future.
- They feel safe and secure surrounded by the things
- Some items have emotional meaning to the patients

4.3 Mental Health Disorders

Patients with hoarding disorder can experience -

- Depression
- Anxiety disorders
- Obsessive Compulsive Disorder ⁴

5. Types of Hoarding

It can be object hoarding or animal hoarding.

1) Object hoarding: - common possessions are the objects which are accumulated and saved by people who hoard. These include :
   - Books
   - Containers and bags
   - Garbage or rotten food
   - Clothing ²
   - Paper: - large stacks of newspapers or mails that clutter entire house
   - Leaflets and letters
   - Bills and receipts ³
   - Appliances
   - Electronics ⁶

2) Animal hoarding: - According to Hoarding of Animals Research Consortium, animal hoarding is the pathological accumulation of animals including cats, dogs, rabbits, birds, guinea pigs and farm animals. The conditions are unsanitary at home and have accumulation of animal feces and urine. ²

6. Levels of Hoarding

The National Study Group on Compulsive Disorganization created a clutter hoarding scale with five levels of Hoarding:

Hoarding Level 1 (least severe): It include –

- Light amount of clutter which might hide the condition, but the person may still have difficulty throwing away items
- All doors and stairways are accessible
Hoarding Level 2: It includes clutter around the residence specifically in two or more rooms, and narrow pathways through the home. Person suffering from this disorder avoid inviting people to their residence and may cause anxiety which lead to social withdrawal. The features of this level are:
- Animal waste on surfaces
- Signs of household rodents
- Overflowing garbage cans
- At least three instances of feces in a litter box

Hoarding Level 3: It includes visible clutter outside the home including items that are usually indoors such as television and furniture. There are noticeable fleas, spider webs and narrow paths through the halls and stairways. Individual suffering from this level has poor personal hygiene and may become angry when family or friends try to persuade them to change their lifestyle. Other features are:
- At least one unusable bathroom or bedroom
- Small amounts of hazardous substances or spills on floor
- Excessive dust, dirty clothes or sheets
- Odors throughout the house

Hoarding Level 4: It includes visible fungus growth in the house, structural damage, odors and sewage accumulation. These individuals often have poor hygiene and worsening mental health. Other features are:
- No clean utensils
- Beds with lice, bugs and no sheets which makes it unusable
- Excessive spider webs and Flammable substances stored in living room
- More than one blocked exit

Hoarding Level 5: It is the most severe level and involves severe structural damage to the residence. The individuals suffering from this level stay at a friend’s or family member’s house due to the excessive clutter at their residence and have noticeable symptoms of depression. Other features are:
- Clutter filling bathrooms and kitchen
- Noticeable human feces
- Fire hazards, no electricity and broken walls

7. Diogenes syndrome versus hoarding disorder

Diogenes syndrome is described by a pathological tendency to accumulate objects called sylogomania which is similar to hoarding. The diagnostic requires one major criterion, the inability to ask for help, and one of three minor criteria: a pathological relationship to the body, society and with objects. This last criterion is similar to hoarding disorder as patients with Diogenes syndrome tend to hoard every object they find.

8. Treatment

Treatment can help people with hoarding disorder decrease their accumulated belongings and live safer, more enjoyable lives.

8.1. Psychotherapy

1) Cognitive Behavioral Therapy
It is the type of therapy which is used to treat hoarding disorder. Treatment needs the support from family and friends to help remove the clutter. In this patient is taught to:
- Identify and challenge thoughts and beliefs related to acquiring and saving items
- Resist the urge to acquire more items
- Organize and categorize items
- Improve decision making and coping skills
- Increase social involvement with more meaningful activities

2) Motivational interviewing: it is a technique that is used to try to increase the patient’s desire to work on the problem and get them to commit on a values driven basis.

3) Acceptance and Commitment Therapy (ACT): - it is a way of teaching people concrete tools so they can act in service of their own values, versus acting in service of fear or shame or despair and sadness.

4) Exposure therapy: - in this patients are exposed systematically to the upsetting feelings and thoughts that they have about getting rid of things and teaching them about distress tolerance, little by little.

8.2. Medications

There are currently no medications approved by the Food and Drug Administration (FDA) to treat hoarding disorder. Medications are given to treat symptoms of anxiety and depression. The most commonly used medications are antidepressants called selective serotonin reuptake inhibitors (SSRIs).

References

eryvillage.com/mentalhealth/hoarding/related/levels-of-hoarding/


Author Profile

Ms. Priyanka Thakur graduated from Sant Baba Bhag Singh Institute of Nursing, Jalandhar in 2012 and post graduated from S.G.L. College of Nursing, Jalandhar in 2015. After completion of post-graduation, she started working in National College of Nursing, Barwala, Hisar (Haryana) and now she has started pursuing her PhD from Desh Bhagat University, Punjab in 2020.