



Caring for You: Help for hoarders

By **TRACY HAMPTON**

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Denise Egan Stack is a member of the Cape Cod Hoarding Task Force Steering Committee. She's also the OCD Massachusetts President, President of the International OCD Foundation, and a cognitive behavior therapist doing home-based treatment for people with OCD and related disorders. She lives in Cummaquid.

Q. How does someone know if he or she has a hoarding disorder or is simply an avid collector?

A. Hoarding disorder is a complex psychiatric condition comprised of three related problems: collecting too many items, difficulty getting rid of items and trouble with organization. As a result, people accumulate a significant amount of clutter, which prevents them from being able to use their living space as intended, creates health or safety risks, and/or causes distress or impairment in their day-to-day living. An avid collector may acquire things but generally will not experience negative consequences as a result of their hobby. Also, collectors often display their collections while people with hoarding disorder are unable to because of clutter and disorganization.

Q. How does hoarding affect a person's health and loved ones?

A. Over two decades of research shows that hoarding disorder affects a person's health in many ways. For example, hoarded homes are at greater risk for fire and mold or mildew, and people living in hoarded homes often have respiratory problems and poor self-care and nutrition. People with hoarding disorder are at an increased risk of homelessness due to eviction, are socially isolated, have legal problems due to lost or unpaid bills, and have large credit card debt due to compulsive buying. Hoarding disorder affects family relationships, too. For instance, we know that growing up in a home with hoarding disorder leads to a less happy childhood because children are embarrassed, have fewer friends over and have very strained family relationships. Adult children often feel burdened by the problem and frustrated by their loved one's low insight about the problem or low motivation to fix the problem.

Q. How does hoarding relate to obsessive compulsive disorder and how does it differ?

A. For many years, hoarding behavior was considered a symptom of obsessive compulsive disorder (OCD). However, most people with hoarding disorder don't meet diagnostic criteria for OCD and research shows us that there are significant differences in the genetics, neurobiology and treatment outcome for people with hoarding disorder versus OCD. As a result, hoarding disorder is now a separate disorder in the new OCD and Related Disorders category in the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition.

Q. How does hoarding start and progress — and do we know what causes it and what makes it worse?

A. Studies indicate that about 4 percent to 5 percent of people suffer from hoarding disorder and that symptoms generally start in childhood, around age 13, and they maintain a chronic and steady course throughout life. It is one of the few mental health problems that worsens over time. Experiencing a loss or traumatic event may worsen symptoms.

Q. How does the Cape Cod Hoarding Task Force work to help people with hoarding disorder?

A. The Cape Cod Hoarding Task Force (www.hoardingcapecod.org) was established in 2010 as an advisory group to help coordinate a multi-agency response to hoarding cases that come to the community's attention. The task force is an all-volunteer group comprised of health agents, first responders, medical and mental health professionals, social service providers, attorneys, and private business owners who are committed to working together to resolve complicated cases in a compassionate, professional manner. The group meets bi-monthly for case consultation and educational presentations on topics related to hoarding disorder. Also, the Cape Cod Hoarding Task Force organizes semi-annual trainings for community members and professionals, develops

relationships with like-minded task forces around the state, works with various media outlets to raise awareness in the community about hoarding, coordinates local agencies to implement joint service plans, and helps many local families.

Q. Is there a sense of how significant the problem is on the Cape?

A. We don't know the exact prevalence of hoarding disorder on Cape Cod but given the most recent research available, we believe that at least 4 percent to 5 percent of the population is affected. I run a free Buried in Treasures group for people with hoarding disorder in the area (www.hoardingcapecod.org/support-groups/).

Q. What do you find most satisfying about your position?

A. The Cape Cod Hoarding Task Force is led by a group of five steering committee members: Lee Mannillo, Erika Woods, Paul Wild, Deb Scavotto and myself. (Editor's note: Mannillo died unexpectedly this month after childbirth.) While there are many aspects of the work we enjoy, we are especially pleased to be able to provide a much needed service to the community in which we live and work.

Caring for You is a monthly feature that highlights the work of Cape Codders who deliver health care without fanfare.

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