Mornay suffers from obsessive compulsive disorder and wants others to understand his condition

STUCK IN MY BRAIN

By SUZANA HAUMAN  Pictures CORRIE HANSEN

HE’S DRIVING to work and sees a pedestrian on the side of the road. “What if I hit him and he dies?” he thinks. He can’t shake the thought and eventually turns back to check if the pedestrian is alive.

“Your brain gets stuck,” says obsessive compulsive disorder (OCD) sufferer Mornay Fourie (44) of Franskraal in the Western Cape.

“Even after you’ve put your mind at ease that you’re not responsible for anyone’s death you still feel guilty and you can’t get rid of the feeling.”

Mornay, a caterer, was diagnosed with OCD 12 years ago. The condition can turn an ordinary trip to work into a nightmare, but thanks to medication and psychological counselling he now leads a normal life.

He decided to speak frankly to YOU in the hope that more people will understand what the condition entails.

“OCD isn’t about irrational fears,” he says. “There is a chance I can hit someone. There is a chance that germs in my food can cause people to become ill.

“It’s realistic, so it’s not as if you’re seeing little green men from Mars,” he explains.

Research into the disorder is now being conducted by the Medical Research Council’s Unit for Anxiety and Stress Disorders at the Universities of Cape Town and Stellenbosch.

“We’re hoping to do something to make this ‘mysterious disease’ more understandable,” research team leader Professor Christine Lochner says.

“The greater the awareness about OCD, the greater the chance that someone who’s struggling with it will consult the right professional people.”

HE’S been different from others since childhood, Mornay says.

“When we went on family holidays to the seaside I sometimes didn’t go swimming with my brothers and sisters. Instead I’d stand on the beach and count their heads over and over again to check everyone was still there.”

His obsessions culminated in 2001 when he bought a new bakkie. “I found out later that it was a stolen vehicle. I wasn’t involved in the offence but I couldn’t get rid of the idea that I was guilty.”

Driving became one of his most serious obsessions. The mere thought that he could hit a pedestrian was enough to trigger compulsive behaviour.

“It would become a long drawn-out process to check over and over again that the pedestrian was still alive. Sometimes I would turn back to check the person was still okay.

“If I happened to see an ambulance I had to follow it to check it wasn’t transporting the pedestrian.”

He’d also keep an eye on the news and scour newspapers for any report about a hit-and-run accident. The next day he’d drive back to the spot to ensure there were no blood stains in the road.

When he could no longer face driving, his wife, Charmaine (46), had to take him everywhere. “But even that was torture. I was too scared to talk to her in case I distracted her and she had an accident.”

Many OCD sufferers fret about their own
Mornay Fourie’s life was ruled by the obsession that he might hurt someone. So he kept checking the road for signs he might have run down a pedestrian and washing his hands to avoid poisoning people when he cooked food.

health and hygiene but Mornay is obsessed with not hurting others.

“Before preparing food I used to wash my hands over and over again and repeatedly check the expiry date on food labels. My job means I often prepare food for people I don’t know so I can’t check afterwards that no one became ill.

“If I were to read a newspaper report about food poisoning somewhere I would be convinced I’d caused it.” It became increasingly difficult for Mornay to function normally and he became so depressed he would stay in his bedroom.

“I basically had a breakdown and eventually saw a psychiatrist.”

Today, 12 years after being diagnosed, he has his condition under control. “I’m on medication but also went for cognitive behaviour therapy with a psychologist.”

It took a while before he could apply the cognitive therapy technique successfully. The psychologist used to give him “homework” such as driving past a school where there were lots of kids milling about.

“But I couldn’t do it; it made me too anxious.”

It was only about four or five years ago that his brain suddenly seemed to get the technique. “I would for instance wash my hands before preparing food and realise it was enough. Then I’d force myself not to wash them again.”

The more he managed this, the less of a hold the disorder had on him.

“It’s a conscious decision but a hard one. It’s easy to say to yourself, ‘What does it matter? There’s no harm in washing your hands again’. But if you give in the obsession just becomes stronger.”

Whereas in the past his obsession drove him to compulsive behaviour up to 30 times a day, he now has an attack only about once every three months.

“It’s always there and you have your off-days. But I can live with it.”

It also took some time for Charmaine, who works at a garden centre in nearby Gansbaai, to adapt to Mornay’s condition. “He was diagnosed barely a year after we were married and I was unsure of how to handle it.”

She was usually Mornay’s sounding board when he wanted to check things. “When he started getting better I had to get used to him no longer asking so many questions.”

His family found it difficult to understand his condition. Mornay says, “Initially it made me angry but later I realised I couldn’t blame them because they didn’t know what was going on in my head.”

Mornay’s friends also didn’t understand how OCD affected him. “Some rejected me. But I was young and also used to talk flippantly about ‘the mad house’ or ‘crazies’. Suddenly the shoe was on the other foot and I had to see a psychologist.”

Many people are aware of the superficial signs of OCD, such as someone being overly conscious about germs and repeatedly washing their hands. But sufferers also have “intrusive thoughts” that can be humiliating or of a sexual nature.

While other people can let such thoughts go, they become an obsession with OCD sufferers. “It especially upset me if I had these thoughts in church,” Mornay says. “I value my faith so I’d feel guilty and disappointed in myself. I had to realise that just because I have these thoughts doesn’t mean I’m going to act on them.”

Mornay hopes people who read about his situation and have similar experiences will realise they aren’t alone.

“Most of us have odd little habits and fears. But as soon as they become time-consuming and prevent you from functioning normally, warning lights should flash. There is help.”

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**DO YOU SUFFER FROM OCD?**

The SA Depression and Anxiety Group (Sadag) lists these as signs that a person could be suffering from OCD:

- Frequent absence from school or work.
- Repetitive behaviour.
- Continuous questions and need for reassurance.
- Simple tasks take much longer than usual.
- Often late for appointments.
- Obsessing about small things.

For more info call Sadag on 0800-20-5026 or Mental Health Information Centre at mnic@sun.ac.za or 021-938-9229.

**SOURCE:** Sadag.org

**IMPORTANT RESEARCH**

Obsessive compulsive disorder affects two to three per cent of the population, says Professor Christine Lochner of the Medical Research Council’s Unit for Anxiety and Stress Disorders.

“We look at genetic aspects but also at the structure and functioning of the brain,” she says about the work the unit does.

The condition is equally prevalent in men and women. Men usually start developing symptoms in their teens and women in their early twenties.

If someone has OCD there’s a slightly bigger risk that their children will develop it. Yet rituals such as excessive handwashing aren’t usually passed on.

If you suffer from OCD and want to take part in Professor Lochner’s research call her on 021-938-9179 or e-mail her at clt2@sun.ac.za.

Mornay, who runs a successful catering business, says the support of his wife, Charmaine, has been invaluable.