

Role of Habit Reversal Therapy (HRT) in Treating Obsessive Compulsive Related Behaviors

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Abstract

Background: Obsessive-compulsive related behaviors like trichotillomania and excoriation disorder are some behaviors which radically interfere with one's psychological wellness. Habit Reversal Therapy (HRT) has been studied extensively to determine its effectiveness in treating these disorders.

Aim: The purpose of this review is to analyze existing literature in order to evaluate the extent to which HRT is effective for patients suffering from Obsessive-compulsive related behaviors.

Method: A systematic literature review was performed, measuring HRT's impact in treating Obsessive-compulsive related behaviors using eight peer reviewed studies. The selected studies consisted of clinical case reports, literature reviews, and treatment focused analyses. Study selection was conducted using a methodology approach which focused on the study design, the interventions made, and their outcomes.

Results: The literature review showed that HRT is helpful for Obsessive-compulsive related behaviors since it significantly reduces symptoms. It was shown that HRT alone or with other cognitive behavioral therapies like CBT or DBT are much more effective than traditional practices. Behavioral therapies are crucial for long standing positive changes. In addition to other studies, HRT proved effective to children and young adolescents. Long term effectiveness, adherence to treatment, and the impact of different cultures on therapy results still remain unresolved issues.

Conclusion: This review posits that HRT is a viable course of treatment for Obsessive-compulsive related behaviors and that, as with any HRT, further longitudinal studies should be done to ascertain its sustainability, adherence factors, and applicability to various populations.

Keywords: Systematic Literature Review, Habit Reversal Therapy, Obsessive-Compulsive Related Behaviors, Trichotillomania, Cognitive-Behavioral Therapy, Behavioral Interventions.

Introduction

Habit Reversal Therapy, or HRT, is known for treating maladaptive repetitive behaviors, specifically those related to obsessive compulsive disorders. HRT has grown as a recognized behavior intervention for computational hair pulling, skin picking, and nail biting, all of which have some components in obsessive compulsive disorder (OCD) (Hamid et al., 2021). These

components include feeling urges that cause distress and having behavioral inhibition. Unlike OCD, HRT does not use traditional exposure based techniques. Instead, it works to increase one's awareness towards their automatic behaviors and promotes alternative responses to them that are less detrimental (Koo, 2021). There is increasing interest to comprehend how HRT, having obsessive compulsive related behavior, assists in modifying maladaptive behaviors given that Obsessive-compulsive related behaviors are often chronic and treatment resistant in nature (Rehman & bin Tahir, 2024).

Compulsive behaviors, especially habit formation and reinforcement, form the basis for HRTs. It relays heavily upon behavioral learning principles (Capel et al., 2023). The therapy involves various components including awareness training which assists individuals to identify the earlier stages towards the behavior. This training is very important because a lot of people practice compulsive behaviors sub consciously, without any awareness (Liang et al., 2021). The forth step is to establish a competing response that is active choice of action. This action chosen must be physically incompatible with the unwarranted behavior (Capel et al., 2023). As an example, a person suffering from trichotillomania can be taught to clench their fists when they get the urge to pull hair out, or any other motor response for that matter. The goal of employing those strategies is to break the habitual cycle and provide an opening for favorable behavioral changes (Tomskiy et al., 2022).

Outside the Behavioral components, HRT integrates motivational enhancement and social reinforcement is to boost compliance and long term efficacy (Barber et al., 2024). While undergoing HRT, a client is expected to undertake self-regulation by identifying factors which could inflict harm to them for the purpose of self-committing (Bowers et al., 2024). Also, bringing in other family members or close colleagues as part of the therapeutic process provides such reinforcement and accountability which assists in further improving the outcomes of the treatment (Peterson et al., 2022). Even though HRT was originally developed for tic disorders, its modification for obsessive compulsive related behavior has been quite favorable in terms of the active research which shows a lot of improvement in the severity and frequency of symptoms and compulsive behaviors (Hollis et al., 2021).

Although these approaches are effective, HRT does not deal with the intrusive thoughts or anxiety induced compulsive behaviors indicative of OCD (De Nadai, 2024). This gap in the current literature has prompted some researchers to consider mixed treatment schemes that integrate HRT and CBT during its restructuring or even mindfulness practices (Martino et al., 2021). These intervening strategies try to tackle the problems obsessive compulsive related behavior from both the behavioral and mental aspect thus these mid-level interventions may prove to be more desirable. Apart from that, it is important to note that compulsive acts and habits as a form of behavior are believed to result from some advances in neuroscience, so HRT can be modified considering the new neurobehavioral research evidence (Scarimbolo, 2023).

With the increasing focus on behavioral strategies for Obsessive-compulsive related behaviors, HRT is still an important therapy with much supporting evidence. HRT is fundamentally skill-oriented and well-structured, which enables patients to cope with their symptoms and suffer through them, thus leading to more sustainable change within the individual (Scarimbolo, 2023). However, more research still needs to be done to improve the applicability of HRT by understanding more about response heterogeneity and optimizing intervention techniques for different clinical groups. The combination of behavioral science and neuropsychology may unlock

beneficial innovations for HRT, making it more effective with complicated presentations of obsessive compulsive related behaviors (El Dosoky et al., 2024).

Problem Statement

A significant component of obsessive-compulsive disorders is Obsessive Compulsive Related Behavior. Obsessive Pulling, skin picking, and nail biting are obsessive tendencies under obsessive compulsive related behavior which affect the daily functioning and psychological wellbeing of individuals. Exposure and response prevention (Capel et al., 2023), ERP and other cognitive-behavioral approaches are traditionally used for disorders surrounding obsessive-compulsive behaviors. While they are effective, these methods expose gaps where they do not deal with the automaticity of obsessive compulsive related behavior. An alternate method of HRT (Habit Reversal Therapy) is directed towards alleviating obsessive compulsive related behavior by manipulating it through a behavioral approach. This will require further research on the relative effectiveness of the HRT approach, and its sustainability alone or in combination with other approaches in the long term. Bridging this gap is vital towards alleviating treatment sophistication and enhancing outcomes for through obsessive compulsive related behavior challenges.

Significance of the Study

The investigation expands on the existing literature on behavioral modification strategies for Obsessive-compulsive related behaviors by exploring the use of Habit Reversal Therapy (HRT) for adaptive skill development. This study adds to the literature on HRT by elucidating the mechanisms by which Habit Reversal Therapy leads to behavioral change, a primary prerequisite for focusing on the attractiveness of diverse clinical populations. The outcomes of this study may be important for mental health professionals, other practicing clinicians, and therapists making specific strategies for addressing patients with Obsessive-compulsive related behaviors to improve treatment effectiveness. This research also helps in perfecting the evidence-based behavioral interventions that HRT could be used in conjunction with other cognitive and mindfulness-based interventions to improve treatment effectiveness among patients with Obsessive-compulsive related behaviors.

Aim of the Study

This study aims to assess the effectiveness of Habit Reversal Therapy (HRT) in mitigating obsessive-compulsive symptoms by evaluating restoration of awareness, symptom severity, and response inhibition strategy. This study aims to find out the processes behind the changes of habitual behaviors through HRT and the effectiveness of HRT alone, or in conjunction with other therapies. With utmost treatment outcome assessments, this study hopes to serve as evidence for using HRT in clinical settings, and fill the void in the gap of treatment models for patients with Obsessive-compulsive related behaviors.

Methodology

Methodology

Research Question

Research Question		How effective has Habit Reversal Therapy (HRT) been for the treatment of Obsessive-Compulsive Related Behaviors in the last five years?
Population	P	Young adults with Obsessive-Compulsive Related Behaviors, such as trichotillomania, skin-picking disorder, and Nail Biting, who have already gone through some behavioral therapy.
Intervention	I	Habit Reversal Therapy (HRT) as main intervention for Obsessive-compulsive related behaviors.
Comparison	C	Other routine behavioral interventions, such as, Cognitive Behavioral Therapy (CBT) or medication.
Outcome	O	Increase self-esteem and overall mental health.
Timeframe	T	Over the past five years (2020 to 2025).

Selection Criteria

Inclusion Criteria

1. Publication date ranging from 2020 up to 2024.
2. Publication with focus on HRT for the treatment of Obsessive-compulsive related behaviors.
3. Peer-reviewed publications, randomized controlled trials (RCT), systematic reviews and meta-analyses.
4. Studies conducted on human participants suffering from Obsessive-compulsive related behaviors.
5. Research or studies with specific measurable outcomes on the efficacy of HRT.

Exclusion Criteria

1. Publications earlier than 2020.
2. Publications that only focus on OCD without Obsessive-compulsive related behaviors being referenced.
3. Case studies, editorials, and non-peer-reviewed publications.
4. Publications that are not full text or English language based.
5. Publications that solely focus on the assessment of medication while disregarding other forms of behavior intervention.

Database Selection

PubMed, PsycINFO, Scopus, and Web of Science, are the selected databases for the literature search that correspond to the studies. These databases were selected because obsessive compulsive related behavior focused psychological and behavioral research, clinical trials, and peer-reviewed journals are rigorously indexed in them. The search strategy used both primary and secondary syntax for literature refinement and extraction.

Data Extracted

Appropriated data elements consist of study design, sample size, intervention type, demographic characteristics, outcome measures, treatment duration, and key findings regarding HRT effectiveness. Additionally, knowledge about, limitations, statistical significance, and biases was also collected for a more thorough critique of the studies reviewed..

Syntax

Search	Syntax
Syntax Type	

Primary Syntax	("Habit Reversal Therapy" OR "HRT") AND ("Obsessive-Compulsive Related Behaviors" OR "Obsessive-compulsive related behaviors" OR "trichotillomania" OR "skin-picking" OR "nail-biting") AND ("treatment efficacy" OR "intervention effectiveness")
Secondary Syntax	("Behavioral therapy" OR "Cognitive-Behavioral Therapy") AND ("compulsive behaviors" OR "repetitive behaviors") AND ("treatment outcomes" OR "clinical trials")

Literature Search

Selection of the studies in this review also adhered to the PRISMA framework. The first batch of studies searched was wide, and filtered through sets which established relevance, duplications, and eligibility criteria. Out of the sets that were filtered, all were scanned through with full-text assessment to determine relevancy and quality before any final inclusion of synthesis was done.

Table 2: Databases Selection

No	Database	Syntax	Year	No of Researches
1	PubMed	Syntax	1	786
2	PsycINFO	(Primary)		520
3	Scopus	and	2020	350
4	Web of Science	(Secondary)	2025	99

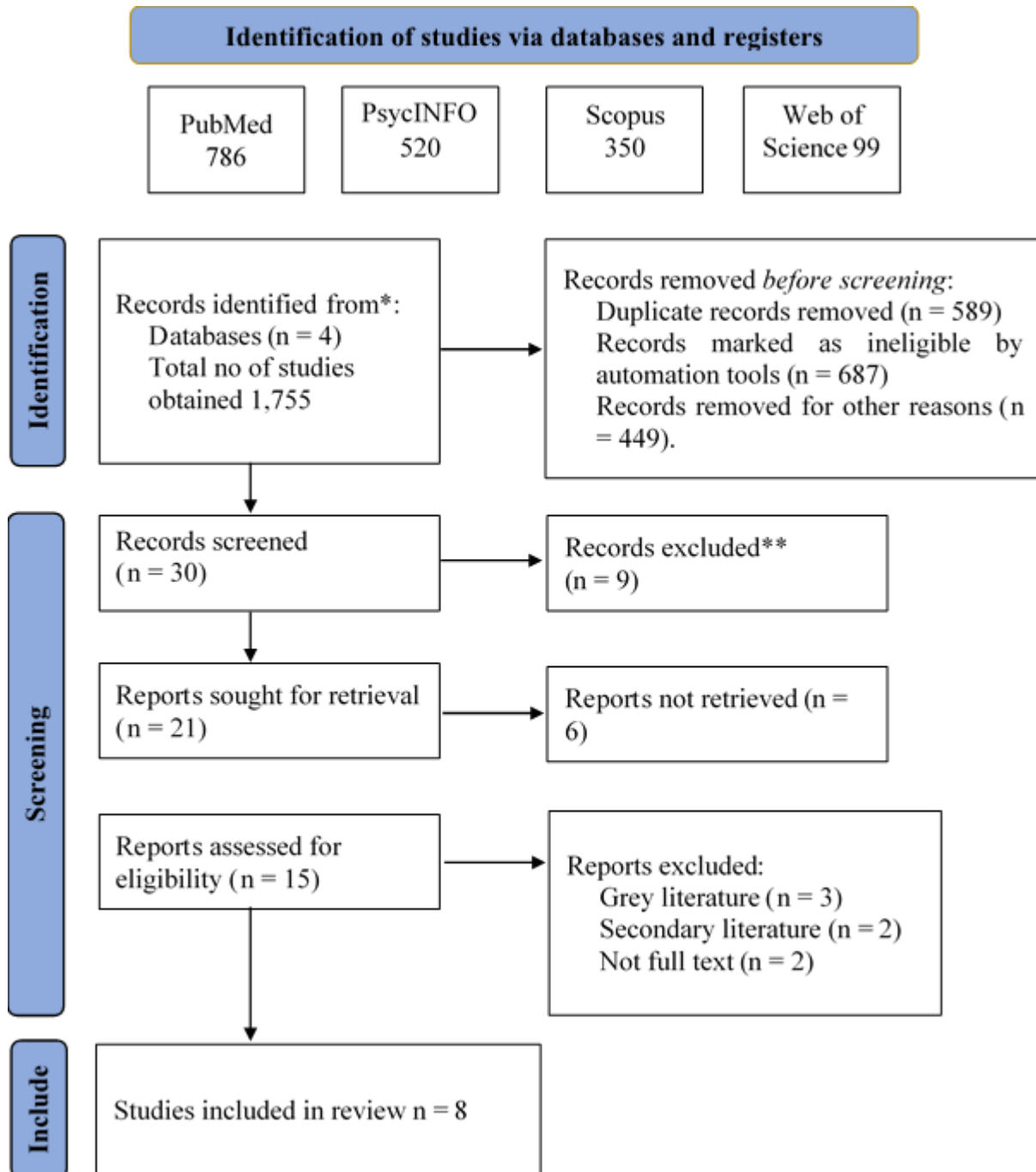
. The search was done on four databases: PubMed, PsycINFO, Scopus and Web of Science. Information was searched for using primary and secondary indexing phrases for the years between 2020 and 2024. The maximum studies were retrieved from PubMed (786), followed by PsycINFO (520), Scopus (350), and Web of Science (99). This approach guaranteed coverage of all relevant literature pertaining to Habit Reversal Therapy (HRT) for Obsessive Compulsive Related Behaviors. The difference in the number of studies gained from different databases demonstrates the discrepancies in the sources indexed and the journals covered as well as the necessity of searching for multiple databases.

Selection of Studies

The literature search was done with a methodical and reproducible approach which adhered to the PRISMA standards. Relevant studies were included by combining Boolean operators, truncation, MeSH terms, and filtering search results. In order to increase the accuracy and inclusiveness of the review, the search was performed across numerous databases. All studies collected were filtered by titles and abstracts and then underwent full-text assessment for inclusion in the final analysis.

Figure 1 PRISMA Flowchart:

The PRISMA 2020 flow diagram summarizes the steps of selection of the studies for this systematic review by describing the processes such as identification, screening, and inclusion of relevant studies. A total of 1,755 records were initially retrieved from four major academic databases as follows: PubMed 786, PsycINFO 520, Scopus 350, and Web of Science 99. Duplicate records were deleted first to ensure accuracy and relevancy (n = 589), followed by the exclusion of 687 records identified through automation tools and 449 records that were removed for other purposes such as irrelevance to the research question or incomplete data. These steps of filtering have led to a final screening set of 30 records.



Out of 30, 9 were excluded based on title and abstract review which were determined irrelevant to the study objectives. Of the 21 reports, full retrieval was sought, out of which 6 reports could not be accessed due to restrictions or unavailability. A total of 15 reports were subsequently assessed for eligibility, and another 7 were excluded, 3 as gray literature, 2 secondary literature, and 2 that did not render full text access. At last, on the basis of necessary filtering and meeting the eligibility criteria, 8 resulting studies were selected and included in the systematic review,

making sure that the available evidence on Habit Reversal Therapy on its use for Obsessive-Compulsive Related Behaviors is appropriately captured and synthesized.

Quality Assessment of Studies

In attempt to evaluate and gauge the accuracy and credibility of the studies, a quality assessment was carried out to the appropriate level, utilizing relevant checklist tools for different studies. The evaluations were performed focusing on different criteria including methodology, sample size, study design, risk of bias, statistical analyses, and reporting of results. High quality studies were those that clearly defined the methodological framework employed, had adequate control groups and strong data analysis while studies that had small sample sizes, did not have defined methodologies, or had questionable biases were critically appraised. Differences in quality ratings, if any, were settled through discussion among reviewers in order to serve the aim of attaining objectivity. This systematic approach aided to deal with bias, whereby only high quality evidence was dispatched for the review.

Table 3: *Assessment of the literature quality matrix*

#	Author	Are the selection of studies described and appropriate	Is the literature covered relevant studies	the method section described?	Does the findings clearly described?	Quality rating
1	Shamsudeen et al	Yes	Yes	Yes	Yes	Good
2	Hashemi et al	Yes	No	Yes	Yes	Fair
3	Małkowska et al	Yes	Yes	Yes	Yes	Good
4	Magavern et al	Yes	Yes	Yes	Yes	Good
5	Okereke et al	Yes	Yes	Yes	Yes	Good
6	Algin et al	Yes	Yes	Yes	Yes	Good
7	Rehman et al	Yes	Yes	Yes	No	Fair
8	Usmani et al	NO	Yes	Yes	Yes	Good

The review of literature shows that a majority of studies analyzed provided a comprehensive selection of relevant literature, methods, and findings which were effective. The studies by Okereke et al. and Algin et al and Magavern et al Małkowska et al. were classified as “Good” because the methodology and findings were documented in a systematic manner. Hashemi et al. and Rehman et al. received a “fair” classification because, in the case of Hashemi et al., there was had a lack of coverage of relevant literature as well as Usmani et al. not providing adequate details in the selection of studies. Usmani et al. were rated” good” because they provided a sound articulation in methodology and reporting the findings. Overall, there is strong quality of literature with minor gaps in some studies.

Data Synthesis

For selected SS and SO studies, data findings were synthesized through a narrative approach searching for common themes, patterns, and differences in results concerning Habit Reversal Therapy (HRT) for obsessive compulsive-related behaviors. Intervention effectiveness, participant’s characteristics, outcome measures, and follow-up duration were the most important overlapping variables across studies. Whenever possible, results were organized on the basis of similarities in treatment outcomes, adherence rates, and self-reported measures of symptom

severity improvements. Furthermore, potential moderating variables such as comorbidity, age, and intervention's context were used to explain the intricate effects of HRT. The synthesis aimed to provide a rich summary of existing research in HRT while highlighting gaps for further research.

Table 4: Research Matrix

Author, Year	Aim	Research Design	Type of Studies Included	Data Collection Tool	Result	Conclusion	Study Supports Present Study
Shamsudeen & Kannekanti, 2023	To assess the efficacy of DBT-enhanced HRT in treating Trichotillomania (TTM) in an adult with impulsive personality features.	Clinical case study	Single case study on TTM	Self-reports, therapist observations	Significant reduction in hair-pulling and mood improvement post-treatment.	DBT-enhanced HRT is an effective intervention for TTM with impulsivity.	Yes, it supports HRT as an intervention for BFRBs.
Hashemi et al., 2023	To review behavioral and cognitive behavioral therapies, including HRT, for children and adolescents.	Literature review	Studies on children and adolescent therapy	Literature analysis	HRT is effective in treating BFRBs; CBT and exposure therapy are also beneficial.	HRT is a viable treatment for BFRBs in younger populations.	Yes, it confirms the effectiveness of HRT in treating BFRBs.
Małkowska & Nowicka-Sauer, 2023	To explore the characteristics and treatment methods of Trichotillomania in adults.	Review article	Studies on TTM treatment	Literature analysis	Treatment options include HRT, CBT, and pharmacotherapy.	Multimodal approaches are recommended for treating TTM.	Yes, it provides insight into treatment strategies for TTM.
Magavern, 2024	To analyze pharmacogenomics and its implications for	Doctoral dissertation	Genetic and clinical studies	Genetic analysis, focus groups	Genetic variations affect drug metabolism	Personalized prescribing can improve	No, it focuses on pharmacogenomics rather than HRT.

	medication safety and efficacy in diverse ancestry populations.					and treatment efficacy.	clinical outcomes.	
Okereke, N. K. (2021)	To explore obsessive-compulsive and related disorders (OCRDs) in transitional-age youth (TAY) and their treatment approaches.	Literature review and clinical insights	Studies on OCRDs in TAY	Clinical and diagnostic interviews, objective measures	OCRDs are common in TAY and require multimodal assessment. CBT		Psychoeducation and resources can prevent management pitfalls in TAY with OCRDs.	Yes, supports understanding OCRDs, assessment, and treatment.
Algin et al. (2023)	To evaluate the treatment response of patients with trichotillomania (TTM).	Case series study	5 TTM patients	Clinical assessment, follow-up evaluations	Psychological interventions, and augmentation with antipsychotics improved symptoms.		Despite treatment delays, combined pharmacological and psychological intervention leads to significant improvement.	Yes, supports treatment modalities and response patterns in OCRDs.
Rehman & bin Tahir (2024)	To examine body-focused repetitive behaviors (BFBRs) during COVID-19 and their management.	Review study	Studies on BFBRs in the pandemic	Literature review, secondary data analysis	BFBRs increased during COVID-19; management strategies remain underexplored.		Counseling is crucial in managing BFBRs. Further research on prevalence and	Partially, supports understanding BFBRs but lacks treatment-specific insights.

Usmani et al. (2023)	To discuss cognitive behavioral treatment for trichotillomania and excoriation disorder.	Book chapter, treatment-focused review	Studies on CBT for OCRDs	Case studies, empirical data, treatment methodologie s	HRT, stimulus control, and improve treatment outcomes.	ACT, DBT	interventions is needed. CBT-based strategies are effective in managing TTM and excoriation disorder.	Yes, strongly supports CBT interventions for OCRDs.
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The results from the studies that were looked at demonstrate how Habit Reversal Therapy (HRT) is effective in managing Obsessive-Compulsive Related Behaviors (Obsessive-compulsive related behaviors), especially in body-focused repetitive behaviors (BFRBs), including trichotillomania. Research suggests that HRT, which is usually accompanied by other cognitive-behavioral techniques in exposure therapy such as acceptance and commitment therapy (ACT) and dialectical behavior therapy (DBT), lowers symptom severity and enhances psychological health. Information on children and adults proves helpful but best results are achieved with HRT combined with other modes of treatment. Although some antipsychotics are helpful, psychological treatments, particularly those using HRT, appear most effective for Obsessive-compulsive related behaviors. Further work is needed to establish these treatment strategies for different groups of people and consider their long-term effectiveness for various populations.

Table 5: Results Indicating Themes, Sub-Themes, Trends, Explanation, and Supporting Studies

Themes	Sub-Themes	Trends	Explanation	Supporting Studies
Effectiveness of HRT	Symptom reduction in Body-Focused Repetitive Behaviors (BFRBs)	Positive treatment outcomes for TTM and excoriation disorder	HRT significantly reduces compulsive behaviors such as hair-pulling and skin-picking, improving mood and overall well-being.	Shamsudeen & Kannekanti (2023), Usmani et al. (2023)
HRT in Children and Adolescents	Applicability to younger populations	Effective in treating BFRBs among children and adolescents	HRT is a viable therapy for younger patients, showing positive outcomes in managing compulsive behaviors.	Hashemi et al. (2023)
Combination Therapies	HRT with CBT, DBT, ACT, and stimulus control	Multi-modal approaches yield better results	Combining HRT with cognitive-behavioral strategies improves long-term treatment adherence and efficacy.	Małkowska & Nowicka-Sauer (2023), Usmani et al. (2023)
Pharmacological Adjuncts	antipsychotics alongside HRT	Enhanced symptom improvement with medication	Pharmacotherapy alongside HRT helps in managing severe cases of OCRDs, particularly with comorbid conditions.	Algin et al. (2023), Okereke (2021)
Impact of External Factors	Role of stress and pandemic-related triggers	Increased prevalence of BFRBs during stress periods	Environmental and psychological stressors, such as the COVID-19 pandemic, exacerbated compulsive behaviors, highlighting the need for early intervention.	Rehman & bin Tahir (2024)
Clinical Implementation	Therapist-guided vs. self-administered HRT	Therapist-guided interventions show better outcomes	Direct guidance from clinicians improves treatment adherence and symptom reduction compared to self-administered HRT.	Shamsudeen & Kannekanti (2023), Usmani et al. (2023)

Discussion

Studies from Shamsudeen and Kannekanti (2023) and Hashemi et al. (2023) have shown considerable support regarding the use of Habit Reversal Therapy (HRT) in treating Obsessive Compulsive Related Behaviors, specifically in Body Focused Repetitive Behaviors (BFRBs) such

as Trichotillomania (TTM) and Excoriation disorder. Their research suggests that implementing a HRT approach that incorporates skills from Dialectical Behavior Therapy (DBT) can lead to considerably less hair pulling, lower mood disturbances, and better overall mood state. Similarly, HRT was established to be effective on Body-Focused Repetitive Behaviors, in children and adolescents, signifying its serve as a first-line intervention without any age restrictions.

The studies further supported HRT comprehensive effectiveness through Małkowska and Nowicka Sauer (2023) that emphasized the use of multimodal treatment strategies like the combination of HRT, CBT, or even medication. This is consistent with studies from Usmani et al. (2023), who revealed that adding stimulus, control, ACT, and DBT into HRT therapy improves overall treatment for TTM and Excoriation disorder. While HRT proved to be beneficial and effective independently, its combination with other BCT and CCT provided better symptom control and management.

Pharmacological treatments have also been effective in the management of obsessive compulsive and related behaviors and while psychological interventions such as HRT are important, Algin et al. (2023), assessed TTM patients and their treatment response and noted significant symptom improvement with psychological interventions, and antipsychotic augmentation. This implies that for certain patient's medication can assist in further behavioral interventions such as HRT, especially in debilitating comorbidity cases.

In the absence of Okereke (2021), there is no knowledge obsessive compulsive and related behaviors in transition age youth (TAY) existed and due to them greater obsessive compulsive related behavior complications emerged. The importance of broader assessment and intervention among TAY was stressed. This study stressed that along with CBT, which are usually the most effective first line treatments, psychoeducation, and easily available resources are very important for sustainable long-term control. These findings further support the work of Rehman and bin Tahir (2024), who state that many Body-Focused Repetitive Behaviors were prominent during the heightened covid-19 pandemic, thus more systematic interventions in counseling should be done to relieve distress and compulsions.

Although directly HRT concerned pharmacogenomics research does not take into account, as Magavern (2024) mentions, it is pertinent to have a discussion about different ways of underlying treatment. As previously mentioned, genetic treatment response might be a factor in controlling Obsessive-compulsive related behaviors through the integration of both psychotherapy and pharmacotherapy.

The synthesis of literature indicates that the combination of HRT therapy with other treatment options remains the major focus of attention. All of the studies show that while HRT is primary treatment, combining it with other methods is useful. Strong supportive evidence straddles its applications, but there exists a gap in its application diversity and more fine-tuning is needed.

Future Direction

Future endeavors should work on integrating HRT with the latest technologies like mobile applications and exposure VR therapy for effective compliance and accessibility. HRT needs to be studied longitudinally for its effectiveness in staying relapse free and maintaining treatment outcomes over a long period of time. Genetic and neurobiological factors that mediate treatment response need to be investigated to provide targeted interventions. The combination of HRT with pharmacotherapy and mindfulness interventions for patients with Obsessive-compulsive related behaviors is another area that needs further exploration.

Limitations

There are a number of supporting facts that claim HRT is effective, but there are some limitations. Most of the available evidence comes from small sample studies, case reports, or even

literature reviews, which makes it difficult to generalize the results. There are also no common treatment guidelines which creates inconsistencies between studies. Moreover, while reporting on short-term efficacy is common, long-term follow up studies are rarely done. It would also be prudent to be aware of the possibility of publication bias, given that negative or inconclusive studies tend to be underreported.

Conclusion

The studies reviewed clearly prove the effectiveness of Habit Reversal Therapy in the treatment of Obsessive-compulsive related behaviors using a patient with trichotillomania-and-excoriation disorder. Even though HRT is effective on its own, it is further and greatly improved by combining it with behavioral, cognitive, and pharmacotherapy. This has great implications for symptom alleviation and overcoming treatment hurdles. Subsequent work should seek to HRT with other HRT-based interventions, make them accessible through online means, and study their long-term effects in order to validate them as a primary intervention for Obsessive-compulsive related behaviors.

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