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Obsessive–Compulsive Disorder, Tattooing and Bizarre Sexual Practices

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Background. A case is presented describing an association between obsessive–compulsive disorder, tattooing and unusual sexual practices.
Method. A single case report.
Conclusions. Tattooing and unusual sexual practices are compulsive behaviours associated with the subject's obsessive–compulsive disorder. Such associations have not previously been described in the literature.

We wish to describe a case report which provides evidence for an association between obsessive–compulsive disorder and both tattooing and bizarre sexual practices. The individual concerned has read this paper prior to submission and despite the unusual nature of this case has offered no objection to its publication following a full discussion of the implications of publication with respect to confidentiality.

Case report

A 27-year-old man who had been unemployed for five years was referred with symptoms of complex rituals and daily checking of routine events in his flat, such as washing, cleaning, door locking, bed making and placing an item of furniture in a particular position at particular times. The referral followed increasing distress, resulting in bouts of heavy drinking in an effort to suppress his symptoms and subsequent attendance at the Accident and Emergency department. He was unmarried, of normal intelligence and average educational background. He showed resistance to his compulsive urges which he felt were irrational. He denied feeling depressed and there were no symptoms indicative of depressive disorder. There was no evidence of thought disorder, delusions or hallucinations and cognitive function was normal.

Further enquiries revealed a 10-year history of obsessional tattooing. He had his first tattoo at the age of 15 with some friends on a visit to the seaside. At this age he was still functioning normally and was not disabled by compulsive behaviour. Over subsequent years he had further occasional tattoos but always at the same local parlour. He began to attend at the same time each week to spend the same amount of money. He would ultimately spend about one-third of his weekly wage of £180 on tattoos. As parts of his body were filled he wanted all the remaining spaces between the drawings to be shaded by the tattooist. When these were filled he wanted all the line drawings to be coloured and eventually even skin in drawings of people was coloured with flesh coloured ink. He felt driven to have most of his skin covered.

The weekly ritual of compulsive tattooing lasted almost ten years and was only reduced in intensity by lack of money resulting from unemployment and lack of skin surface area. The result is that his legs and arms are completely tattooed and his chest and abdomen complete within defined territories. If this history is accurate, and we have no reason to doubt his report, we estimate that his compulsion to attend at the same time each week, at the same cost, will have resulted in him spending £30 000 on his tattoos.

He later volunteered information regarding his unconventional sexual practices whereby, after he had partaken in a prescribed series of rituals, he fixed to his penis at two points (underneath the foreskin and at the base of his penis) two wire electrodes which were attached to a self-styled induction coil which generated a current of up to 33 000 volts by a hand turned crank. He claims that his aim was to achieve 'just the right type' of painful stimulation to sustain a pre-orgasmic level of excitement for as long a time as possible and he continues these sessions for up to 15 hours, two to three times weekly. He has on occasion sustained severe electrical burns to his genitals.

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He admitted that his obsessional desire for 'just the right kind of pain' was one of his motivations in pursuing his extreme form of tattooing. His compulsive striving for perfection and completion, whether in the realm of his body tattooing or in pursuing his rather extreme and dangerous sexual practices seems to be related to his need for pain to be present. "I need pain so that I am able to concentrate" and only when he is totally satisfied that he has attained the "perfection and completion" that this kind of pain brings can he stop.

Discussion

Although the association of tattooing and erotic piercing has been made occasionally in the literature (Buhrich, 1983), none has been made between tattooing and such bizarre sexual practices as described above and certainly none which links obsessive–compulsive disorder with both of the above.

Whereas there is considerable discussion in the literature of the psychiatric significance of tattoos (Ferguson-Rayport *et al*, 1955), much of this work is restricted to the prevalence of types of psychiatric disorder in tattooed subjects compared with those who are not tattooed (Gittleson *et al*, 1969). This has resulted in speculation about the reasons for the reported association between certain diagnoses and tattooing (Raspa & Cusack, 1990).

The literature, while not particularly satisfactory in its methodology, does tend to indicate that there is an association between the presence of tattoos and various types of personality disorder. There is a tentative report of an association between borderline personality disorder and sexual abuse in female patients with tattoos (Inch & Huws, 1993). The tattoos of schizophrenic patients are usually single and professionally applied and the individual visits to the tattooist have usually been in the company of others while drunk (Ferguson-Rayport *et al*, 1955). We could find no reference in the literature to another case of an obsessionally driven compulsion to be tattooed or to partake in the sexual practices described above.

Clinical implications

- Compulsive tattooing may present in OCD.
- Unusual sexual practice may present in OCD.
- Patients with OCD may initially not reveal full details of their compulsive behaviour due to embarrassment.

Limitations

- Single case report.
- Literature on psychiatric aspects of tattooing currently unsophisticated.
- Treatment effect in this patient as yet unknown.

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