

INTRUSIVE THOUGHTS

A NEWSLETTER FROM THE DEPARTMENT OF PSYCHIATRY'S OCD CARE TEAM

GAMES TEACH US A LOT ABOUT LIFE

The concept of 'play' is gaining more traction in the health field. Play is important developmentally and psychologically in our younger years, but as we age and get sucked into working life, it becomes that much more vital to intentionally incorporate the 'work hard, play hard' mentality as a protective measure for our mental and physical wellbeing.

We learn a lot about ourselves, our emotions, and our lives through playing games. When we lose a game, our ego takes a hit. When we win a game, we feel accomplished and proud of our skills. This directly mirrors the fluctuation of our self-concept throughout our lives. Managing emotions related to winning and losing can be a difficult thing to navigate even into adulthood. My 60-year-old dad is even known to yell at the TV during a football game from time to time.

Games come in all forms; playing cards, board games, video games, sports, puzzles, lawn games, the list goes on. **Card games** teach us the importance of identifying possible outcomes. **Video games** teach us how to make difficult and impactful choices. **Board games** teach us how to handle the disappointment of loss. **Puzzles** teach us creative solutions to problems. And finally, **sports** teach us how to work with others towards a shared goal.

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While engaging in game play is more normalized and necessary amongst youth, playing as an adult is just as important to personal growth. Games can build stronger connections with others as well, whether you are co-op or head-to-head. Consider this as a reminder the next time you go to grab the remote, to try a board game with your roommate or partner instead!

There is no reason why therapy can't be fun! Play therapy is a common form of therapy used with children. The modality informs the facilitator about how the child sees the world, providing a peek into their perspective. Exposure therapy also can incorporate play at any age. At the OCD Program's Intensive Outpatient Program, we often plan 'Field Day' for the group to enjoy being outside and play a few games, while simultaneously challenging and exposing themselves to new or difficult tasks. Upon reflection, there is a general consensus that the 'play' aspect made certain exposures more approachable and even helped manage anxiety in the moment. OCD and anxiety focus on worst case scenarios and all things serious and dire. Play, humor, fun, and silliness are simple ways to combat OCD in every day exposure therapy. When life is an exposure, play the game of life.

Sincerely,

Erin LeBeau



OUR TEAM

- Dr. Rachel Davis MD - Medical Director and Psychiatrist
- Emily Hemendinger LCSW, MPH, CPH, ACS – Clinical Director/Licensed Clinical Social Worker and DBS Coordinator
- Dr. Stephanie Lehto PsyD – OCD Therapist/Licensed Psychologist
- Dr. Jake Gadbow MD - Psychiatrist
- Katie Sinsko MSW, SWC -- Social Work Fellow/IOP Therapist
- Orah Fireman, LCSW, MEd -- IOP Behavioral Health Specialist/Licensed Clinical Social Worker
- Erin LeBeau MSW --IOP Therapist/OP Therapist
- Cate Rush MSW --OCD Therapist/Social Work Fellow
- Jennifer Quigley PA-C --Prescriber, Physician Assistant
- Jake Winchester LPC --OCD Therapist
- Jennifer Fishman BS --IOP Care Coordinator/Behavioral Health Specialist
- Otis Rush – Therapy dog extraordinaire
- Rachel Lehnert-- MSW candidate/Social Work Intern/OCD Therapist
- Abby Osterlund-- MSW candidate/Social Work Intern/OCD Therapist
- Jeremy Lawrence – MSc/Psychology Extern

Interested in contributing to the newsletter? Email the editor at Emily.Hemendinger@CUAnschutz.edu



STAFF SPOTLIGHT: CATE RUSH

Cate Rush, MSW, is a social work fellow with the OCD and Anxiety Program. Cate splits her time between the Intensive Outpatient Program and the outpatient OCD Clinic. Cate earned her master's degree from the University of Denver Graduate School of Social Work and is working towards clinical licensure. She enjoys encouraging patients to challenge longstanding beliefs about mental health, OCD, food / bodies, and weight stigma. Cate has a therapy dog named Otis who has become an integral member of the team working with patients, posing for interviews, and supporting all staff members. In her free time, Cate can be found skiing, camping, or standing on top of mountains, always accompanied by Otis

GROUP OFFERINGS

*Mondays at 4pm (monthly)
Intro to ERP - for new group members*

*Mondays at 6:30pm
For adults ages 18+ with OCD and related disorders*

*Tuesdays at 5pm
For adults ages 18+ with OCD and related disorders*

*Wednesdays at 6pm
For adults ages 18+ with OCD and related disorders*

*Thursdays at 4pm
For adults ages 18+ with OCD and related disorders*

We do have a waitlist for individual and group therapy, please reach out to be added to our waitlist and/or send you other referrals.

Are you a clinician who wants to know more about OCD and ERP? We offer trainings, consultations, and supervisions!

[CLICK HERE FOR MORE RESOURCES ON OCD AND ERP FOR CLINICIANS AND PATIENTS](#)

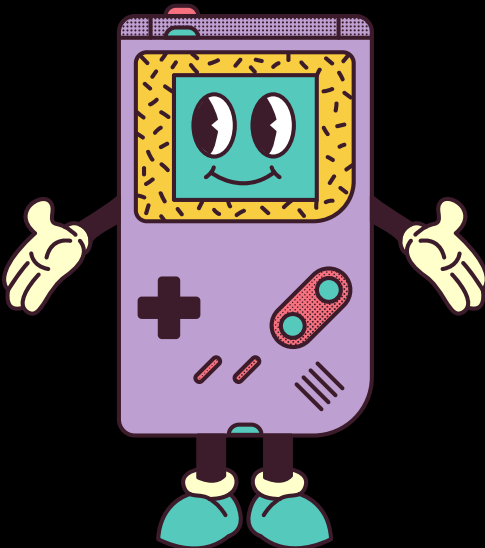
No Really, I Gotta Catch ‘Em All!

By Stephanie Lehto

You’ve probably heard about hyperfixation—focusing, really really focusing, on something that is fun or interesting, that brings you joy (ADDA Editorial Team, 2024). This is not to be mistaken for hyperfocus, which is also focusing on something but usually is with a task or activity that is not necessarily fun and sometimes called “flow” (ADDA Editorial Team, 2024; Ashinoff & Abu-Kel, 2021). Both hyperfixation and hyperfocus can lead to feeling like you’re losing time and not noticing external things (Ashinoff & Abu-Kel, 2021).



Hyperfixation and hyperfocus are the most common with ADHD and Autism Spectrum Disorder but may be experienced by anyone. Of course, there are also obsessions, which are intrusive thoughts that cause distress and can take up so much of your mental energy that they become all encompassing. The big difference being hyperfixation and hyperfocus can be fun, and obsessions are not.



You can experience hyperfixation on anything that may be interesting or enjoyable, but let’s talk about video games. Have you ever found yourself wanting to play a video game, thinking about a video game when you’re not playing it, researching how to get to the next level or how to have the most effective grinding to build your experience, or playing for hours on end? That’s a pretty common experience, because video games are fun and engaging with immediate rewards that reinforces playing. Plus, there’s a clear goal that guides what we do!

Video games, even when we experience hyperfixation, are not necessarily an issue unless they interfere with sleep, school or work, relationships, and activities of daily living. It can also be problematic when we feel we have to play instead of wanting to play, as it can become something that is more compulsive than joyful. When this happens, it is important to create space for breaks (set a timer!), discover other hobbies that bring joy and help you feel reinforced, and create some rituals for transition (like when I have played a round, I will take a water break which includes filling a cup).

Similar to most things, moderation really is the answer—live in the gray! I will not stop playing Pokémon completely, I do not expect you to stop your hyperfixation completely. But, as always, we love a good boundary. Even with ourselves.



***“Dude, be proud of your hobbies. Makes you who you are.”
– Sam Winchester***

References

- ADDA Editorial Team. (2024, July 12). ADHD & hyperfixation: The phenomenon of extreme focus. Attention Deficit Disorder Association. [Add a little bit of body text](#)
- Ashinoff, B. K., & Abu-Akel, A. (2021). Hyperfocus: The forgotten frontier of attention. *Psychological research*, 85(1), 1-19.

Playing Around with Playfulness in ERP

By Emily Hemendinger

Playfulness is key to a balanced life and being resilient. It helps us be flexible, creative, and able to enjoy life. Without playfulness, we take life, and ourselves, too seriously and can easily be bogged down by the nitty gritty.

Currently, many are feeling that playfulness cannot exist, reporting increased feelings of hopelessness, frustration, and burnout. However, playfulness does not mean ignoring those feelings or ignoring what is going on in the world. In fact, playfulness encourages us to think outside the box and challenge conventions (and maybe even systemic power and hierarchical structures). Playfulness challenges those of us who want control and predictability over a situation. Playfulness encourages connection and challenging ourselves to be spontaneous and more present.

Playfulness can be especially helpful in our OCD and ERP journey. OCD symptoms wax and wane, so being able to adapt, problem solve, and be flexible can be the important difference between being able to pick ourselves up from a slip or continue sliding into relapse. When we can inject playfulness into our life and ERP, this takes power away from the OCD and allows us to improve our resiliency.

There are many ways to gamify ERP and it isn't a one size fits all approach. Below are just some ideas on how to shake up your ERP practice with a little playfulness:

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- Create a BINGO card or scavenger hunt list of OCD triggers.
- Play improv games! These are great ways to practice cognitive flexibility and mindfulness.
- Use memes to incorporate humor into your worst fears, ERP journey, and symptom management (check out Jon Hershfield's memes on his Instagram account for some great examples!)
- If you have "hit and run" OCD, treating driving like a video game. For every bump you drive over on the road, exclaim how many points you would get for hitting someone, as if you were in a video game. For example: "25 points!" Every person your OCD tells you that you hit, gets you more points. (obviously making sure to practice response prevention after this)
- Next time you have the urge to compulsively research something, instead of going down that rabbit hole, create a PowerPoint presentation for your therapist (or family) about said topic. Go through and pick out the cognitive distortions, OCD thoughts, and actual facts.
- Create an ERP themed escape room. Fill the room with a combination of puzzles commonly found in escape rooms AND include exposures from your hierarchy. You "win" by completing all the exposures and puzzles.
- For interoceptive exposures, try playing a game of Musical Chairs. Nothing like a childhood game of scarcity to get your heart racing! Or chug a soda/seltzer and then have a dance party to bring on some burps, fullness, nausea, and other possibly uncomfortable sensations.
- Make a mess (and leave it for a set time period)! Be it with art and crafting supplies, cooking supplies, or straight up mud!
- Make bad fortunes and have other people pull them from a jar.
- Use thought defusion techniques. For example: say your intrusive thoughts in a silly voice
- Is there a task that takes you forever to complete because of compulsions (e.g. showering, doing the dishes, writing, email, etc.)? Have a race with a friend or loved one. Whoever finishes first wins a prize.



The possibilities are truly endless. So go forth, be silly, and be playful!

Let's Get Flexible!

By Katie Sinsko

OCD thought patterns are notoriously rigid by nature, largely in part due to the reinforced cognitive traps that are typically at play with the disorder. OCD oftentimes like to categorize things into boxes, such as “good or bad” or “right or wrong,” with little room to look at situations with nuance or have two conflicting ideas be present at once. If rigid maladaptive thought patterns are not challenged, it becomes more difficult to break out of all-or-nothing thinking traps or be able to practice shifting perspective.

There are many ways to practice incorporating more flexibility into our day-to-day – this can look like taking a different route home from work, completing tasks with a non-dominant hand, or incorporating variety in planned coping mechanisms and response prevention (RP) tools. Listed below are some ideas for how to incorporate flexibility into different areas of life. Consider choosing one option from each category (or create a category of your own!) to try this week:

Ways to practice flexibility socially:

- Choose a new spot to hang out with a friend
- Be open to shifting plans last minute
- Start a conversation with a stranger
- Join a book club or group where you don't know anyone at first
- Wear something new/different than normal when attending a social outing this week



Ways to practice flexibility in routines:

- Complete half of a chore
- Do a task at a different time of day or different day of the week than when you usually do it
- Take a different route home
- Take a different path when walking
- Change the order of steps in a certain routine (for example, switching the order of steps you take when showering or getting ready in the morning)
- Complete a routine task with non-dominant hand

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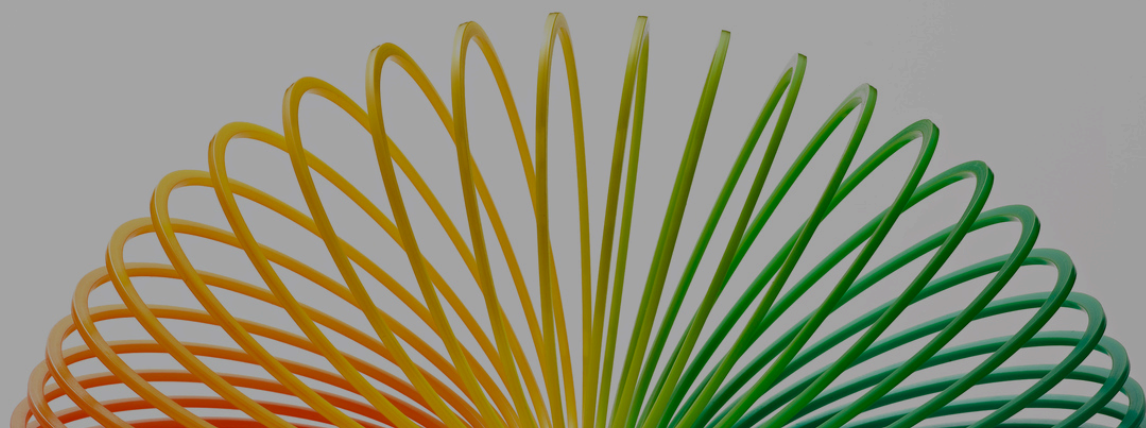
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Ways to practice flexibility with treatment expectations:

- Reflect on the “small wins” from the week, no matter how small
- Reflect on what you’ve learned in the process of trying something even if it didn’t work out. Was there value in the process of trying that thing, even if the outcome wasn’t ideal?
- Consider ways to bring more self-compassion into goals for the week
- Challenge “should statements” with restructuring practices
- Consider breaking down a goal into smaller steps that might feel more approachable through the week
- Utilize a variety of coping mechanism/RP tools throughout the week. Consider utilizing a tool that you haven’t tried in the past.

Ways to practice flexibility at work/school:

- Write/type in a different color or font than usual
- Intentionally leave a typo or mistake in an email to challenge perfectionism
- Set a time limit for a certain task and then walk away from it/take a break when the timer is up - even if you need to return to the task later
- Start a conversation with a coworker, peer, or classmate that you haven’t talked to much before
- Take a step toward your goal even if you don’t fully complete the goal (for example: opening your laptop and writing a single sentence for a paper. Then leaving that sentence in the document even if it doesn’t feel “right” at the moment)



OCD Program Happenings



Above: In June, Emily (left) was awarded the 2025 University of Colorado School of Medicine's Distinguished Clinician Award. Rachel, her mentor and our Medical Director, celebrated at the awards ceremony with her.

Below: Stephanie (left) and Rachel, successfully ran in the Colfax Half Marathon. An impressive feat!



Below: The team presented at the IOCDF's annual conference for young adults about the topic of "Adulting." This presentation addressed executive functioning and other life skills that OCD can make more difficult. They were joined by Kyle Jefferies, who has lived experience with OCD and executive dysfunction. Otis decided to join the photo!



Above: The team in Chicago at the IOCDF's annual conference. They presented on how OCD interacts with having a pet. Otis even joined in to show how therapy dogs can be used in OCD treatment.

CREATIVITY CORNER

GERONIMO!

By Cara Hyman

Burrowing deep inside my hole,
Unwilling to peek out,
Hibernate or take a chance?
Just reach out and shout...

GERONIMO!

Huddling just inside my hole,
Frightened to appear,
Retreat back in or take a chance?
Just reach out and cheer...

GERONIMO!

Sitting just outside my hole,
Daring to crawl away,
Freeze in fear or take a chance?
Just reach out and say...

GERONIMO!

Creeping slowly from my hole,
Hesitant to try,
Change my mind or take a chance?
Just reach out and cry...

GERONIMO!

Wandering farther from my hole,
Confronting every wall,
Give up now or take a chance?
Just reach out and call...

GERONIMO!

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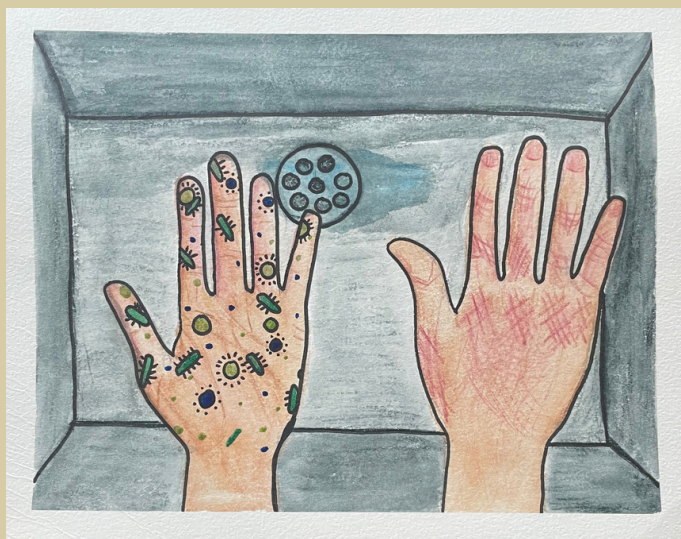
CREATIVITY CORNER

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Walking tall, can't see my hole,
Advancing toward the peak,
Keep moving forward, don't look back,
Just reach out and speak...
GERONIMO!

Standing on the edge,
Yearning for the dream,
I'm ready and I'm willing,
Just reach out and scream...
GERONIMO!

Horizon out ahead,
Watch me as I soar,
I'm so glad I took a chance,
To reach out and roar...
GERONIMO!



By Harper Hanson

Want to share a poem, piece of art, or
mental health related creative endeavor?
Send it to
Emily.Hemendinger@CUAnschutz.edu



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