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TypesIs it normal?CausesConditionsManagementDiagnosisOutlookIntrusive thoughts are unexpected images or thoughts that seem to pop into your head. They're often strange or distressing. But these thoughts and images are unwanted
and often unpleasant. The content can sometimes be aggressive or sexual, or you could suddenly think about a mistake or a worry. You might feel distressed when this happens, but having an intrusive thoughts do not have any particular meaning. As long as you recognize that
these are only thoughts, and you have no desire to act on them, intrusive thoughts are not harmful. However, if they're happening often, causing significant concern, or interfering with your daily activities, it's a good idea to talk with a doctor. Read on to learn more about why intrusive thoughts happen and how you can manage them. There are several
different types of intrusive thoughts. Some people may have intrusive thoughts about doing tasks wrong or leaving tasks unfinished religion, blasphemy, or being an immoral personsexual acts or situations about or saying the
wrong thing in publicIt's also possible to have other types of intrusive thoughts that do not fit into these categories. Sometimes, people who experience intrusive thoughts. People may also feel ashamed and want to keep them secret from
others. Keep in mind that the image or thought might be disturbing, but it does not usually have a particular meaning. If you have no desire or intention to act on the thought, and you can easily move on with your day, then it's probably nothing to worry about. It's common to have an intrusive thought every once in a while. In fact, it happens to almost
everyone. A 2014 study found that about 94 percent of participants had at least one intrusive thought in the 3 months prior to the study. In the 2014 study, "doubting" intrusive thought in trusive thought in the 3 months prior to the study. In the 2014 study, "doubting" intrusive thought in trusive the trusive thought in trusive thought in trusive the t
thoughts are usually nothing to worry about, sometimes they can start to interfere with your daily life. People who feel fear or guilt about their intrusive thoughts, may be experiencing something more serious. If that's the case, it's a good idea to talk with a doctor. Intrusive thoughts may not
have a cause. They can just happen randomly, Some thoughts wander into your brain. Then just as guickly, they exit, leaving no lasting impression. Less commonly, intrusive thoughts are related to an underlying mental health condition, like obsessive-compulsive disorder (OCD) or post-traumatic stress disorder (PTSD). These thoughts could also be a
symptom of another health issue, such as: brain injurydementia Parkinson's diseaselast longer than a brief moment on thing to take lightly. Early symptoms of some conditions may also include: changes in
thought patternsobsessive thoughts thoughts for disturbing imagery These thoughts are not always the result of an underlying condition. Anyone can experience them. But there are several conditions that include
intrusive thoughts as a symptom. They include:In OCD, intrusive thoughts cause serious distress. A person with OCD often makes significant efforts to try to suppress or stop their unwanted thoughts (obsessions). This usually involves repeating particular behaviors or habits over and over. The behaviors and habits, known as compulsions, can
interfere with a person's quality of life. But it's possible for OCD to improve significantly with treatment. People living with PTSD may have intrusive thoughts or memories can bring forth other symptoms of PTSD, such as insomnia or an unpleasant state of overalertness. PTSD can
interfere with a person's daily functioning. However, with trauma-focused treatment, it's possible to get relief from symptoms. People with an eating disorder may experience intrusive thoughts about their body, losing weight, or what they eat. This can include guilt, shame, or fear related to food or body image. These intrusions can cause serious
distress. Eating disorders can also cause significant changes in behaviors related to food and eating. It's important to talk with a doctor if you have eating disorder symptoms. With treatment, it can be possible to avoid serious complications. Intrusive thoughts are powerful because they seem to "stick" in your mind. They're upsetting because they feel
so foreign. The best way to manage intrusive thoughts is to reduce your sensitivity to the thoughts. In CBT, you'll work with a therapist to learn ways of thinking that can help you become less sensitive to the intrusive thoughts. In a
controlled setting, your therapist may also expose you to triggers for your intrusive thoughts so you can learn to react to them differently. Medication. Sometimes, medications are used to treat conditions like OCD and PTSD. Selective serotonin reuptake inhibitors (SSRIs) are commonly prescribed to treat these mental health conditions. Self-care. A
good step toward treating intrusive thoughts. You can learn to label them when they are: just thoughts are not the same as intent or behavior. This may help reduce the frequency or intensity of unwanted thoughts. You can learn to label them when they happen and recognize that thoughts are not the same as intent or behavior. This may help reduce the frequency or intensity of unwanted thoughts.
symptoms and medical history. They may conduct a physical exam and, in some cases, use questionnaires or tests to find out more about your symptoms. If they find no physical issue that could be leading to intrusive thoughts, they may refer you to a licensed psychologist or psychiatrist. These individuals are trained to recognize the signs and
symptoms of possible causes for intrusive thoughts, including OCD and PTSD. A psychologist or psychiatrist can work with you to identify the thoughts when they occur and how you respond to them. This will help them come to a diagnosis and decide whether there's another possible cause. Intrusive thoughts can feel distressing, but if one pops up
once in a while, it's probably nothing to be concerned about. In many cases, they are not caused by anything in particular. By recognizing that it's only a thought, you can help yourself move past it. When intrusive thoughts are related to an underlying condition, like OCD or PTSD, getting started with a diagnosis and treatment may take some time. But
sticking to your treatment plan can help ease symptoms and make the thoughts less frequent. Options like medication and CBT can help you cope with the thoughts are interfering with your day-to-day life, talk with a doctor about your experiences. Getting treatment can help make intrusive thoughts
more manageable. You're chopping vegetables to make dinner when suddenly, out of nowhere, a thought flashes: "What if I cut my finger off?" You don't want to hurt yourself, and the thought leaves you feeling rattled and disturbed. What you just experienced is known as an intrusive thought. Intrusive thoughts are when you experience sudden,
disturbing thoughts or images that come into your mind without warning and refuse to go away. Such experiences are more common than many people may realize. According to the Anxiety & Depression Association of America, about 2% of Americans (or around six million people) experience intrusive thoughts. These thoughts are usually upsetting,
disturbing, or uncomfortable and can repeat themselves on a loop, causing significant distress. Intrusive thoughts are often associated with obsessive-compulsive disorders, but can also occur in people with post-traumatic stress disorder, anxiety, or depression. Below, learn more about how to tell if you're having an intrusive thought, what these
unwanted thoughts might signify, and how to get help. Many people have thoughts come into their mind seemingly at random, imagining or remembering things without consciously intending to do so. However, for some people, these thoughts are unwanted and can be disturbing or hurtful, and it can be difficult to make them stop. It is like having a
song stuck in your head, but the song is about something very upsetting to you. If you experience upsetting, unwanted thoughts that you struggle to let go of or stop thinking about, you might have intrusive thoughts. Intrusive thoughts or stop thinking about, you might have intrusive thoughts. Intrusive thoughts or stop thinking about, you might have intrusive thoughts.
images. Intrusive thoughts that people experience might include the following: Memories of something you want to forget Fear that you or your loved ones will get sick, hurt, or die Unwanted sexually abuse a child
Thoughts of harming yourself or suicide Thoughts of harming or killing someone else Fear that you will do something dangerous or illegal Worry that you forgot something important, like turning the oven off "Normal" is a subjective term. While distressing, intrusive thoughts do not make you a "bad" person. One reason why intrusive thoughts can be
so upsetting is that you might feel like you are going to act on an intrusive thought, like hurting a child or acting out in an inappropriate way. However, the thoughts are upsetting in part because you do not want to act on them. Having intrusive thoughts are upsetting in part because you do not want to act on them.
compensatory or compulsive behaviors opposing the intrusive thoughts. For example, an individual compulsively washes their hands in response to intrusive thoughts about contamination or germs. Intrusive thoughts can occur as a symptom of several different mental health diagnoses. If you suspect that you are experiencing intrusive thoughts, talk
to a qualified professional to determine if you meet criteria for a particular diagnosis. Diagnoses that can cause intrusive thoughts include: Obsessive-compulsive disorder (OCD): Intrusive thoughts are most commonly associated with OCD experience distressing thoughts that
they struggle to let go of, and they might engage in behaviors to compensate or reduce anxiety brought on by the thoughts. Post-traumatic stress disorder (PTSD): One symptom of PTSD is flashbacks, or unwanted memories of the traumatic stress disorder (PTSD): One symptom of PTSD is flashbacks, or unwanted memories of the traumatic stress disorder (PTSD) is flashbacks.
traumatic event will happen or negative self-talk related to the trauma as an intrusive thought. Anxiety disorders: People with anxiety triggers. Postpartum depression: Some parents with postpartum depression experience intrusive thoughts that they will harm their baby.
This can be difficult to disclose due to concerns that providers will think that the parent intends to act on these thoughts. Eating disorders: Research shows that people experience intrusive thoughts
following a traumatic brain injury due to neurological changes resulting from brain damage. In a 2024 study published in the Journal of Clinical Psychiatry, researchers found that 95.8% of participants experienced unwanted intrusive thoughts about intentional harm to their
infants during the post-partum period. The researchers concluded that these types of thoughts are normal during the post-partum period and typically resolve on their own. Fortunately, it is possible to overcome intrusive thoughts. Cognitive behavioral therapy (CBT) can effectively treat this symptom, reducing the frequency of the thoughts, anxiety
associated with them, and any compensatory behaviors. One evidence-based intervention for intrusive thought six called exposure and response prevention, which involves intentionally focusing on an intrusive thought six called exposure and response prevention, which involves intentionally focusing on an intrusive thought six called exposure and response prevention, which involves intentionally focusing on an intrusive thought six called exposure and response prevention.
recognize triggers for these thoughts and manage them in a healthy way. They can also conduct exposure therapy to help you sit with the intrusive thoughts are the result of a trauma history, the therapist can engage in trauma-informed treatment and help
you overcome your trauma. While you might still occasionally experience an unwanted thoughts, and redirect your mind onto more pleasant patterns of thinking. As noted previously, everyone has thoughts come into their head that they did not consciously choose from time
to time. However, if you find that you are frequently having upsetting thoughts and struggling to let go or move past them, you might benefit from support from a therapist. Remember that there is no minimum amount of distress or difficulty that you have to experience before you "earn" the right to have professional support. If you feel like your
do not have to disclose your intrusive thoughts to anyone if you do not feel comfortable. However, if your loved ones know you are struggling with intrusive thoughts. Ask your partner or loved ones about their comfort in hearing about your intrusive thoughts
It can be distressing to hear about an intrusive thought, so make sure that you have consent before sharing disturbing thoughts with someone who might not be emotionally prepared to support you through a difficult moment. You're going about you're hit with a thought that's bizarre, uncomfortable—even shocking. Maybe
thoughts and move on. But sometimes, intrusive thoughts can get out of hand. If your thoughts are causing you a lot of distress or getting in the way of your daily life, it could be a sign of a mental health condition. Seeking treatment can help you learn to manage the thoughts. Let's look at a few different types of intrusive thoughts, and what they
already acting out, that's beyond intrusive thoughts. If you're having trouble controlling aggressive behavior, you'll need to learn how to manage your emotions in a more constructive way. If you need immediate help, you can reach the Suicide & Crisis Lifeline by calling or texting 988 or using the chat box at 988 lifeline.org/chat. You can also text
"MHA" to 741-741 to reach the Crisis Text Line. Warmlines are an excellent place for non-crisis support. Intrusive sexual thoughts Most people—regardless of gender—think about sex quite a bit [2]. It's completely natural. But if you're ashamed of these thoughts, or you think having them makes you a bad person, you can get fixated on them [3, 4]
Remember that thoughts are just thoughts—even if the thoughts are shocking or frequent, they don't define who you are as a person. It's also common for people to have intrusive thoughts about their sexual or gender identity. Working out your identity can be a long and difficult process. It can be stressful, and it makes sense that you'd be thinking
about it a lot. But it's also common for people with OCD to obsess over thoughts that don't seem to line up with their identity [5]. For example, you might identify as lesbian, but have intrusive thoughts about sex with a man. Negative self-talk Negative thoughts about yourself are a common symptom of depression. When you're feeling down, it's easy
thinking. One way to deal with them is to reframe them—find new, more positive ways of thinking about the same situations. Click here for a list of common thinking traps and ways to reframe them. Delusional thoughts If your thoughts are bizarre or paranoid, you might be experiencing signs of psychosis. For example, you might feel like the FBI is
watching everything you do, or that someone is trying to poison you. You might even see or hear things that no one else does. Psychosis can be a sign of a mental illness like schizophrenia or bipolar disorder. Sometimes drugs can also cause psychosis. Other intrusive thoughts These are just a few of the most common types of intrusive thoughts. There are just a few of the most common types of intrusive thoughts.
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suddenly picture yourself punching them in the face. Or you can't stop picturing random people naked. You don't want to think about this stuff, so why does it keep happening? These are called intrusive thoughts, and just about everyone has them from time to time [1]. Usually, people are able to ignore these thoughts and move on. But sometimes,
intrusive thoughts can get out of hand. If your thoughts are causing you a lot of distress or getting in the way of your daily life, it could be a sign of a mental health condition. Seeking treatment can help you learn to manage the thoughts. Let's look at a few different types of intrusive thoughts, and what they might mean. Thinking about hurting
why you're thinking about it so much. Thoughts like these may be a sign of an anxiety disorder, such as obsessive-compulsive disorder (OCD). People experiencing postpartum depression may have intrusive thoughts about harming their baby. If you do have any intent to follow through on these thoughts, or if you're already acting out, that's beyond
intrusive thoughts. If you're having trouble controlling aggressive behavior, you'll need to learn how to manage your emotions in a more constructive way. If you need immediate help, you can reach the Suicide & Crisis Lifeline by calling or texting 988 or using the chat box at 988 lifeline.org/chat. You can also text "MHA" to 741-741 to reach the Crisis
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for people with OCD to obsess over thoughts about sex with a man. Negative thoughts about yourself are a common symptom of depression. When you're feeling down, it's easy to get stuck on thoughts like "I'm
such a loser," or "I'll never amount to anything." The emotion behind these thoughts can be so strong that they feel like facts, rather than intrusive thoughts. Negative thoughts often fall into common patterns, called thinking traps. These are mental shortcuts we take that can lead us to get stuck in our negative thinking. One way to deal with them is
to reframe them—find new, more positive ways of thinking about the same situations. Click here for a list of common thinking traps and ways to reframe them. Delusional thoughts are bizarre or paranoid, you might be experiencing signs of psychosis. For example, you might feel like the FBI is watching everything you do, or that
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orientation obsessions in obsessive-compulsive disorder: prevalence and correlates. Psychiatry Research 187(1-2), pp. 156-9. Retrieved from 2Fj.psychres.2010.10.019 Intrusive thoughts are often painful and disruptive. These thoughts are often painful and disruptive.
different types of intrusive thoughts. Anxiety, depression, OCD, and ADHD are common parlance from mental health creators on social media such as TikTok, and people have resonated with it. In psychiatry, we don't usually talk about intrusive thoughts as one entity.
about intrusive thoughts in psychiatric disorders by David Clark, they are described as "any distinct, identifiable cognitive event that is unwanted, unintended, and recurrent. It interrupts the flow of thought, interferes in task performance, is associated with negative affect, and is difficult to control." (1) In plain language, it means these are thoughts
you don't want, and you can't control, and they keep coming back. They make it hard to think about other things and do the tasks you need to do, and they cause emotional distress. There can be expected, self-limited versions of intrusive
Exciting events can also lead to a self-limited period of intrusive thoughts. When I found out I was pregnant with my first child, I asked my friend who had a 2-year-old if I would ever stop thinking every minute about being pregnant. She reassured me it would quiet down, and it did. But what about intrusive thoughts that don't resolve on their own?
Intrusive thoughts aren't a diagnosis. A variety of psychiatric disorders can cause intrusive thoughts, and the content and patterns of the thoughts include depression, anxiety disorders, obsessive-compulsive disorder, and ADHD. And while there are
approaches that can help intrusive thoughts in a general way, the most effective interventions address the underlying diagnosis. Subtypes of Intrusive thoughts in depression, people experience intrusive thoughts that are "mood congruent." That means the thoughts in a general way, the most effective interventions address the underlying diagnosis. Subtypes of Intrusive Thoughts In depression, people experience intrusive thoughts are consistent with the mood tone—dark, negative, hopeless, self-critical, and guiltyses of Intrusive Thoughts In depression, people experience intrusive thoughts are consistent with the mood tone—dark, negative, hopeless, self-critical, and guiltyses of Intrusive Thoughts In depression, people experience intrusive thoughts are consistent with the mood tone—dark, negative, hopeless, self-critical, and guiltyses of Intrusive Thoughts In depression, people experience intrusive Thoughts In depression and people experience In
"I'm a loser," or "I only cause people pain," or "Nothing is good in my life or the world; everything sucks all the time" are typical of intrusive, depressive thoughts. These can spiral into dangerous types of thinking, such as not wanting to live. Depressive thoughts are often referred to as ruminations. Anxiety disorders notoriously cause
intrusive thoughts. These include specific phobias—such as repeated thoughts about bridges collapsing and how to get places without going over a bridge. Or it can be more generalized anxiety, thinking "what if" around every possible scary outcome. Everyone has general worries sometimes, such as, "What if someone breaks into my house?" But an
anxiety disorder can keep those worries coming over and over, never able to be reassured, making it hard to leave the house—or fall asleep. In children, generalized anxious thoughts often include fears of someone breaking into their home or worries about their parents' safety. Separation anxiety disorder causes children's thoughts to become
crowded with fears of what can happen when a parent is out of sight. In all ages, health worries are common themes of anxious, intrusive thinking. Obsessional fears—worries that can't be quieted with any logic and return ferociously over and
over—are serious medical symptoms. Fear of contamination, fear of saying or doing something you would never actually say or do, and fear that you have already done or said something terrible are some examples. I once worked with a patient who had to re-drive their route home hundreds of times because they thought they had hit something, and
they couldn't be reassured even after checking. OCD thoughts are typically disconnected from our actual interests, actions, values, and desires—and disconnected from other types of intrusive thinking. Attention Deficit Hyperactivity Disorder (ADHD) is
a common cause of intrusive thinking—a "busy brain" that's always thinking and hard to quiet. People struggle to cut through their thoughts to focus on the task at hand. Or there may be over-focus on one thing, making it hard to move to something else. Intrusive thoughts distract internally, and for many with ADHD, these are as hard external
 distractions. Other diagnoses have intrusive thinking. PTSD flashbacks are highly intrusive experiences that aren't just thoughts (perseverations) that can be considered intrusive, but they don't always cause
distress for the person experiencing them—they often feel pleasant and comforting. Eating disorders lead to intrusive thoughts about weight, body image, and food. Additional types of intrusive thoughts are important symptoms in many psychiatric
conditions. Combinations Are Common Combinations of intrusive thinking variations are common, which can complicate the story, but addressing origins remains critical in developing the most effective interventions, and more
Intrusive thoughts are like uninvited guests who show up without warning and start shouting at you—and they won't leave, and they won't leave, and they won't leave, and they are saying and how they say it will be hard to get them to quiet down and move out. References Clark, David
A., ed. Intrusive thoughts in clinical disorders: Theory, research, and treatment. Guilford Press, 2005. Find an Obsessive-Compulsive (OCD) Therapist Get the help you need from a therapist near you-a FREE service from Psychology Today. Atlanta, GA Austin, TX Baltimore, MD Boston, MA Brooklyn, NY Charlotte, NC Chicago, IL Columbus, OH Dallassive (OCD) Therapist near you-a FREE service from Psychology Today.
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thoughts can be violent. You might think about hurting yourself or someone else. Usually, there's no intent behind it—you don't actually want to do those things; it's just a random thought that pops into you're thinking about it so much. Thoughts can be violent. You might think about hurting yourself or someone else. Usually, there's no intent behind it—you don't actually want to do those things; it's just a random thought that pops into you're thinking about it so much. Thoughts can be violent.
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disorder: prevalence and correlates. Psychiatry Research 187(1-2), pp. 156-9. Retrieved from 2Fj.psychres.2010.10.019 Skip to content Everyone has an inner monologue, a steady stream of thoughts, ideas, images, aspirations and recollections. But sometimes when you're going about your business — thinking about what's for dinner or where you
put the TV remote — that flow of ideas is interrupted with an unsettling thoughts are unwanted thoughts are unwanted thoughts of people have intrusive thoughts and images that can cause anxiety and distress. A global study found that 94% of people have intrusive thoughts of losing
control and harming someone. Unlike regular thoughts, intrusive thoughts can feel strange and uncomfortable and are difficult to control. Mayo Clinic psychologist Craig N. Sawchuk, Ph.D., L.P., says, "If you've ever been in a really high place and looked down, you may have thought 'What if I lost control right now and pushed somebody over this
ledge?' "That's an intrusive thought.The vast majority of people experience occasional intrusive thoughts that feel weird or a little uncomfortable but are easy to let go. But, for others, having intrusive thoughts is a recurring issue that may benefit from medical help.Intrusive thoughts can be prompted by many things — such as songs, news stories on
a call from an old friend. Sometimes they just come out of the blue. Additionally, studies show that intrusive thoughts may happen more frequently when you're experiencing stress, anxiety, lack of sleep or mental fatigue. For some people, intrusive thoughts are more than just an odd occurrence here and there; they're a part of daily life. These people
spending more than an hour a day caught up in the intrusions and rituals. But there are other important factors to consider. The intrusions can cause you a great degree of distress and start to interfere with personal, social or work responsibilities. If your quality of life is suffering, it's a good idea to seek help."Intrusive thoughts are a common
symptom of obsessive-compulsive disorder (OCD). People with OCD experience: Obsessions. Repeated unwanted, intense thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or images, like an intense fear about germs or violent thoughts or violent
a person with OCD could be leaving for work and think, "Did I lock my door?" Dr. Sawchuk says, "The question isn't coming from a place of idle curiosity. It's coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from a place of idle curiosity. It's coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't coming from the idea that, 'If I didn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The question isn't lock my door?" Dr. Sawchuk says, "The 
scenarios feel likely to happen."People with post-traumatic event. Signs of PTSD include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event. People who have
anxiety disorders, such as general anxiety disorder (GAD), have a persistent feeling of anxiety that lasts for months or years — often interfering with daily life. Many people with anxiety have recurring intrusive thoughts on a daily basis. Intrusive thoughts are often odd, disturbing and startling. Many include violence or inappropriate behavior — that
the person who is having the thought would never consider doing. Some of the most common intrusive thoughts revolve around: Sexual acts. Engaging in a violent or inappropriate sexual act. Violence against children. Dropping a baby out the window. Aggression. Killing a co-worker. Religion or aspects of religion. Yelling obscenities in church. Death
    iping out of an airplane or off a mountain. Safety. Imagining a loved one getting hit by a car. Trauma. Recalling memories from a traumatic experience. Finding a health care provider who is knowledgeable about intrusive thoughts, OCD or PTSD is the first step in treating these conditions. The International OCD Foundation or the National Cente
for PTSD can help you find therapists, clinics and support groups.Dr. Sawchuk says, "Some health care providers are not familiar with OCD and intrusive thoughts will recognize them for what they are, will not judge you, and will give you effective strategies
to deal with these thoughts."Here are a few of the most common treatments you might experience with your health care provider. Cognitive behaviors that contribute to anxiety. CBT is based on the idea that your thoughts, behaviors and feelings
are all related to each other and have a significant influence on one another. It's used successfully as a treatment for many psychological problems, and research has shown that CBT significantly helps 75% of people with OCD. Most people with anxiety of any kind can benefit from CBT. People can experience long-lasting effects from a course of CBT
that lasts about 4 to 12 sessions. Exposure and response prevention (ERP) is one type of CBT. With ERP, therapists encourage people with intrusive thoughts or OCD to do the opposite of their compulsions. According to Dr. Sawchuk, repetitive behaviors are like overlearned habits. "Exposure and response prevention is a treatment designed to break
those habits," he says. "This isn't simple, but we try to make it a fair fight by starting with smaller challenges before working up to difficult ones. Then we practice these exposures many times to retrain the brain." ERP treatments can lead to some strange — but helpful — situations.Dr. Sawchuk explains, "Someone with OCD may be taking showers
for hours at a time, multiple times a day. Eventually, we try to get that person touching floors and then touching their face, then resisting the urge to wash and disinfect. This can be a powerful learning experience and a fair test of one's fears. It demonstrates that what seems extreme (to the person with OCD) is often actually quite safe."When people
struggle with intrusive thoughts, Dr. Sawchuk sometimes recommends that they write out scripts of their imagined worst-case scenarios and reread them several times in a given day. He says, "Initially, their anxiety might build, but with more readings those thoughts start to become boring and lose their significance. When that happens, the thoughts
become less frequent. "You can receive ERP at therapy appointments, intensive outpatient programs or residential programs. "One important thing about treatment with ERP is that you are learning how to be your own best therapist. That way you can maintain and build upon your progress outside of therapy appointments," says Dr.
Sawchuk. Medication does not eliminate intrusive thoughts but can help control obsessions and compulsions. For example, when discussing intrusive thoughts related to OCD, Dr. Sawchuk says, "Generally, ERP is enough for mild OCD. For moderate to severe OCD, your care team will typically add medication — usually an antidepressant — to
behavior therapy."Research shows that mindfulness exercises can improve attention control, reduce anxiety and reduce intrusive thoughts. There are several variations of mindfulness meditation. People can learn to reduce the significance of their intrusive thoughts by observing them without judgment. The simplest form of
mindfulness is focused on paying attention to the present moment — sometimes focusing on breathing or a specific object. Another option, called acceptance mindfulness, encourages you to look inward, noticing and acknowledging your thoughts and emotions, while choosing action based on important values. Generally, no. For most people, intrusive
thoughts are just byproducts of their busy brains going rogue. Neuroscientists suspect that more than 50% of thinking is "stimulus-independent thought," such as daydreaming. Experts recommend accepting that intrusive thoughts, it might be
because you're stressed, overtired or mentally spent. However, if you're having intrusive thoughts several hours a day or obsessing over what your intrusive thoughts mean, you should be evaluated by a health care provider to see if you have OCD or a similar disorder.Dr. Sawchuk says, "Without treatment, OCD doesn't tend to go away on its own.
But OCD is very treatable, even if you've had it for years or decades." Intrusive thoughts are disturbing ideas or images that enter your consciousness without warning or invitation. The thoughts can occur as part of mental health conditions but not necessarily. The main characteristics are noted below and shall be expanded throughout this guide. Key
pointsEveryone gets intrusive thoughts, but whether they become clinical depends on how you interpret them. There are different types, including aggressive, sexual, harm related and ideas about religion. Intrusive thoughts are not actions. Many people react to the thoughts are not actions. Many people react to the thoughts are not actions. Many people react to the thoughts are not actions.
the thought does not mean you will act on it. You can get over them; they are not a life sentence. Talking therapy such as CBT and ERP help you understand and change your thought without resorting to compulsions. Normal but Unwelcome: Everyone experiences intrusive
thoughts sometimes. They can be strange, upsetting, or even harmful, but they're just thoughts and don't reflect your true character or intentions. Themes Are Diverse: From disturbing images to self-harm anxieties, intrusive thoughts can appear in any form. They often target your deepest fears or vulnerabilities, making them feel incredibly real and
distressing. The Power of Resistance: Fighting or pushing away intrusive thoughts often fuels their power. Learning to accept and tolerate them without judgment is a key step in breaking the cycle of anxiety. Compulsions: Seeking Relief: To manage the discomfort, individuals may engage in compulsions like checking, ruminating.
or avoiding triggers. While these offer temporary relief, they worsen the anxiety in the long run. Breaking the Cycle is Key: Recovery involves resisting compulsions and learning healthier coping mechanisms to manage the anxiety caused by intrusive thoughts. Professional Help Matters: Don't suffer in silence. Seeking help from a therapist specializing
in anxiety or OCD can provide valuable support, guidance, and personalized treatment plans. Are they normal? Having intrusive thoughts is perfectly normal. Almost everyone gets them; 94% of the population, according to Professor Radomsky 2, experience uninvited thoughts. Both men and women get them. However, women's intrusive thoughts may
be more related to relationships or causing harm, and men's tend to be more aggressive or sexual. (2.1)I think a better question is, why do some become problematic? Intrusive thoughts in simple terms. In my video above, I liken intrusive thoughts to unwelcome guests that arrive unexpectedly at your house. You don't invite them in; they walk in. They
are loud, argumentative, and not a good fit for the other people in your home. They demand and take all your attention. What you do next affects how long them more attention. What you do next affects how long them more attention. What you do next affects how long them more attention.
will calm you down, and they will eventually leave. I hope you can see from my metaphor that these unwelcome thoughts or have been recently diagnosed, this guide will help you understand what is happening
and will educate you, particularly it is intended to help you. Know the difference between normal thoughts and intrusive thoughts that could become problematic regarding your mental health and When and how to seek professional help. Interpretation Suppose you have thought, what if I jump in front of the train while waiting on the platform, you have
an intrusive thought. One of my random thoughts was poking myself in my eye with the toothbrush while brushing my teeth. Although momentarily alarming, these thoughts are a passing nuisance for most people. However, depending on how you appraise the thought, they may negatively influence your life. It is not the thought that counts; it's the
appraisal. If, for example, you had thought of pushing someone onto train tracks, and although unpleasant and out of character, you ignored it, you will be fine. However, if you personalised the thought and wondered why you had it, what it meant about you, and whether you were capable of causing harm to another person, you are adding meat to the
bones of the thought. How you interpret the thought plays a role in whether it hangs around. Seeing it as a random thought means you feel the shock once; when you have it. Personalising it and the following analysis is like a double shock; the first hurt is the thought, and the second hurt comes from the thoughts in your head regarding the first
thought! Thinking about thinking or its proper name - metacognition. Metacognition is simply our ability to think about thinking, and it has a significant role in developing intrusive thoughts. For example, consider two people who think of pushing someone onto a train track. Person 1 has a healthy thinking
style and is aware that it is a random thought and dismisses it. Person 2 has more dysfunctional metacognition and starts to think about the thought. What's the
difference between normal thoughts and intrusive thoughts?Normal thoughts?norm
with your mood, for example, in you are happy and have intrusive thoughts may be happy or neutralnot in line with mood, you could be happy and have intrusive thought and it does not
interfere with your daily life, you do not have a problem. The thought keeps repeating and causes distress; this is more obsessional. Furthermore, if you start doing things to ease the discomfort, such as checking or seeking reassurance, these actions that you feel compelled to do, are the start of compulsions. Not being able to ignore the thought and
behavioural changes are signs that they may be affecting your mental health. It is helpful to read this article on what thoughts are. People with OCD experience intrusive thinking when they are thinking, for example. Did I lock the door? Have I done something terrible in the past? Postpartum depression You may experience postpartum
OCD with anxiety-related thoughts that make you think you could harm your baby, which causes intense discress. Post-traumatic stress are one of the significant symptoms of PTSD. The remainder of this article shall discuss the thoughts that occur as part of obsessive-compulsive
disorder. Why Are The Thoughts About Bad Things? I think the best way for me to answer this is to do it in two parts; what things are important to you. For example, I adore animals; if the idea popped into my head that I could harm an animal,
this would certainly grab my attention, as it would shake my values to their core. I could have several uninvited thoughts in my head, but most will go unnoticed. Those that go against my core values, you will probably feel something like fear, disgust or alarm. These
strong negative emotions make the idea appear more robust than it is. So to answer the first part of why the thoughts are about bad things, it is essential to note that it differs from person. It is what you consider bad, what would attack your core values. Once a thought strikes your core values, if you leave it alone, it will wither and die, but if
you pay attention to it, think about it, analyse it, and give it special attention amongst all the other thoughts, it will become stronger. Urges are the same as the thoughts; they are both a symptom in that they fall under the umbrella of obsessions. An urge is an obsession. Typical urges experienced in OCD and Intrusive Thoughts are the same as the thoughts; they are both a symptom in that they fall under the umbrella of obsessions.
someone inappropriatelyWant to kiss someone? This can include kissing someone that you deem inappropriate, such as members of the same sex (if you are heterosexual) to hurt someone that you haven't done. The urges you get depend on what you hold dear, what you value
most. Intrusive Thoughts, including the urges you get, tend to go after your value base - the things you would never do. Urges can also include the desire to carry out a compulsion, e.g., if you falsely believe that you are a terrible
person and have done something bad, you might have the urge to confess. Are the urges different from the thoughts are, in fact, obsessions and compulsions, but the content of the obsessions varies. According to Abramowitz et al. (2010 3), the thoughts fall under the urges and the thoughts fall under the urges and the thoughts fall under the urges and the thoughts fall under the urges are the urges and the thoughts fall under the urges are the urges and the thoughts fall under the urges are the urges a
several categories. Contamination symmetry, incompleteness responsibility for harm, and Intrusive taboo thoughts. This lack of attention may be due to a shame or stigma
surrounding more taboo content (Glazier et al., 2015).4 According to Cathey & Wetterneck, (2013) 5, the public finds more taboo thoughts or mental images of violent sexual acts, sex
with inappropriate people or things, questioning your sexual idea that cause you distress. These types of thoughts can be distressing, as arousel is involved. Even though you have not carried out the act, the idea of it may cause you to feel aroused. Arousel does not mean that it is true; it is a normal physiological response. These
thoughts or mental images are distressing, as you may have unwanted thoughts that could harm a child somehow. This can include unwanted thoughts that you could cause harm to your child. These thoughts can occur in postpartum OCD and
also POCD. These may involve causing harm to yourself or others. Again, these thoughts are distressing as they may include the fear that you may hurt someone or cause physical harm. This does not mean you will carry this out; instead, see it
as one symptom of OCD. These include inappropriate sexual thoughts regarding religious people or figures. Swearing during prayer or worship. Strong urges to misbehave during services. Most people that I work with find it difficult to see these as harmless thoughts. They are more than likely to see them sign that something must be wrong with them
to have such ideas. Or even believe the thoughts-"Why would I be having them if I haven't done......?" They are just thoughts. Read more on Religious OCDMany people have unwanted to the same sex. Suppose you have intrusive
thoughts regarding your sexual orientation. In that case, you still are heterosexual, but you may suffer from doubts because of your beliefs. It is known as Homosexual OCD, and I have a detailed post on HOCD here. These can include thoughts regarding family members. Intrusive
images of family members, for example, naked. "What if I am attracted to my sister, my brother?" etc. This can include worrying about death, which your heart could give up. It can also include distressing images of death, with you is
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normal. Still, you might worry and experience intrusive thoughts and images concerning that they could come to harm or hurt themselves. These types of thoughts may make you seek reassurance regarding their safety. You

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might tell people you care about sending a message or calling you when they reach their destination or message when they are leaving to come home. Meeting a diagnosis and understanding why the thoughts occur can be the basis of a treatment
plan. Suppose you meet with a mental health professional. In that case, they will undertake a complete assessment of your presenting problem to provide you with a diagnosis. This diagnosis is to formulate a plan of treatment. The psychologist or physiatrist will ask you a series of questions to determine, for example, if your unwanted thoughts occur
because of a specific mental health condition, such as OCD. There are two main manuals that a clinician may refer to for diagnostic criteria: International Classification of Diseases; ICD1.1 6Diagnostic and Statistical Manual of Mental Disorders; DSM2. 7In my career, I would have referred to the DSM, and according to DSM, obsessions are Recurrent
and persistent thoughts, urge, or images experienced during the disturbance as intrusive and inappropriate and cause marked anxiety and distress. The person attempts to suppress or ignore such thoughts, impulses, or images or neutralise them with other thoughts or actions. If, for example, your diagnosis is that your intrusive thoughts are occurring
because of having Obsessive-Compulsive Disorder, your clinician can then devise treatment based on the diagnosis of OCD. To answer this, it is worth talking about intrusive thoughts, but as noted by Rachman, (1997), 8 people with
OCD place too much importance on these types of thoughts, and the distress then experienced compels the person to perform compulsions to ease their pain. What is causing you pain is not the thoughts per se but how much power the idea has over you. Do you feel personally responsible for having thoughts like this? Do they
interrupt your day or result in you spending time performing mental analysis or avoiding certain aspects of your life as you are afraid of being triggered? So, to answer, do they ever go away, in terms of OCD, obsessions and compulsions, with proper treatment? Yes, they can. Will you ever get an intrusive thought again? Yes, you will, just as I will, but
it does not have to become an obsession. In a word, no, but there are things you cannot prevent any type of thought from occurring. You might have heard of the pink elephant experiment. If not, try this. Do not think of pink elephants; that's all you
have to do. Do not think about their trunk, whether it is a blush pink, baby pink or bright pink, do not think of pink elephants. I'm guessing your first thought was of a pink elephant. That's normal. No matter how hard you tried not to think of
pink elephants, the thought or image would still come. That's just how your mind works. It's near impossible to stop a thought from coming, but the key is, just like the pink elephants is neutral and you will forget about it quickly and will not subject it to the screening
and analysis that you reserve for your intrusive thoughts, which paradoxically only serves the strengthen the thoughts. It follows do I stop them, but what do I need to do to overcome them? Before explaining more formal therapy options, I shall start by discussing things you can try by yourself to help with your thoughts. It follows the many serves the strengthen the thoughts.
a stepped-care approach to treatment, starting with the least intensive intervention, such as self-help, before moving to counselling with a licensed mental health professional. Do not give time to the thought; label and move on If you analyse your thoughts, wondering why you have them or what it says about you as a person, there are models of therapy
that will help you stop doing this? Thoughts need energy to survive. Acceptance and Commitment Therapy works well by teaching you to label the thought and move on. You can do this right now, although it takes practice. Next time you have an intrusive thought, label it just as a thought and move your attention
away rather than dedicate time to it. Try it now.Decide on your label. You can use a label such as there's an intrusive thoughtIt's just a thoughtFor example, if you were thinking that you are going to shout out something really bad during your Church service, rather than trying to stop the thought or analyse it, tell yourself; I am having an intrusive
thought.Do not try to stop the thought be desserts, pie, steak, whatever it is, do not think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something, the more likely you will think about it. Try this for yourself to stop thinking about something it.
increase in saliva? If you did, not only did you think about the thought, but you changed your physiology, as your body is now preparing for food! Keep labelling; and move on. Accept your thoughts as 'just a thought.' You react to them as accurate or worried that you might act on the thoughts
and cause harm to yourself or someone else. You have developed several ways to cope with your thoughts, including avoiding things or avoiding thin
accept them, the thoughts shall no longer mean anything to you with practice. They keep popping into your mind because you shine a spotlight on them, trying to avoid them, and adopting various tactics to ensure you do no harm. Your brain has decided, 'this is something we need to pay serious attention to.'
Learning to label them and move on helps to stop this. Stop doing things differently. You might have changed the way you exist in the world to prevent yourself from causing some harm (concerning your thoughts.) For example, if youhave intrusive thoughts regarding knives, you might have moved the blades in your kitchen, or Experience unwanted
thoughts regarding children, you might avoid children, you might avoid children's parties, be extra careful with how you look at a child or be uncomfortable bathing and dressing children, you may avoid people, places or things that trigger your thoughts. It would be best if you learned to stop doing this, as even though the
strategies you have developed help you in the short term, they are not effective long term, as they only keep this cycle going. Cognitive Behavioural Therapy, besides mindfulness-based approaches, combined with relaxation training, will help you achieve this. Know the difference between thoughts and reality There is a stark contrast between I will
stand up and shout something obscene in Church right now, and I am worried I might say something blasphemous. The first thought. I am going to punch that person. Doubt I am worried I might hurt someone. Understanding doubt
and reality is crucial in overcoming unwanted intrusive thoughts. Once you can see the difference, it becomes easier to accept that you might do something in the past and cannot remember it is not the same as actually doing it. People with
intrusive thoughts go out of their way, carrying out elaborate compulsions to ensure they never act on the thoughts. For example with obsessive thoughts or Pure O may not know they carry out compulsions. The following example with obsessive thoughts or Pure O may not know they carry out compulsions to ensure thoughts. People with
HOCD may check themselves to ensure their sexual preference has not changed. This checking is carried out to ease the distress caused by internal thought and is a compulsion. Someone with Harm OCD may remove objects they fear might hurt someone. This compulsive act is carried out to prevent a feared consequence. Trust your senses I shall start
with a more classic OCD example to explain how to start trusting your judgment. A person with OCD may lock their front door, repeatedly pull the handle, unlock and relock and stare at the door for a long time before feeling able to walk away. The
actions and sight. In non-OCD tasks, they rely on their senses; for example, if a person has just put a plate in the cupboard and walked away and I ask where the plate in the cupboard. If I ask two people about their romantic preference, one may state;
that they are, for example, heterosexual, and if I inquire how they know, they can trust their judgment to answer the question. However, if the person has Sexual orientation themed OCD, they will not be able to trust their judgment and check to see if
they are attracted to members of the same sex or opposite sex and if they are lesbian or gay. If you have been heterosexual or in a same-sex relationship, your sexual identity should be a given; it is a fact based on reality. The doubt caused by intrusive thoughts conflicts with reality. Do not overuse your senses. In the example above, where the person
repeatedly locks the door and stares at it, to overcome the obsessive thought that the door might not be locked, they have to relearn to trust their senses, and they do that by using the following. Lock the door and look at the action of turning the key, and walk away. It can be challenging to begin with, as doubt will create high anxiety levels. Resist
walking back to check the door, as this will reinforce the pattern that checking makes you feel more relaxed and reassured. Psychoeducation. Arm yourself with information fyou are ready to start therapy, I appreciate that this may be daunting, as you may feel deep shame and fear regarding discussing your thoughts. For that reason, I have included
articles on MoodSmith to make the process as transparent as possible. Start by reading this introductory series. CBT is well-researched and remains one of the most influential models of therapy as noted by Healthline is used to manage intrusive thoughts Read more on CBT here. Exposure and response prevention is a gold standard, according to
Abramowitz, 199610in the model, you are exposed to your thoughts without ritualising. Ritualising is where you perform the compulsion, such as assurance seeking. You can read more about ERP and how it helps here. RecapAny random thought. As assurance seeking. You can read more about ERP and how it helps here. RecapAny random thoughts without ritualising is where you perform the compulsion, such as assurance seeking. You can read more about ERP and how it helps here. RecapAny random thoughts without ritualising is where you perform the compulsion, such as assurance seeking. You can read more about ERP and how it helps here. RecapAny random thoughts without ritualising is where you perform the compulsion, such as assurance seeking. You can read more about ERP and how it helps here. RecapAny random thoughts without ritualising is where you perform the compulsion is where you perform the computation is a second to the computation of the performance seeking. You can read more about ERP and how it helps here. RecapAny random thoughts without ritualising is where you perform the computation is a second to the computation of the performance seeking. You can read more about ERP and how it helps here. The computation is a second to the computation of the performance seeking. You can read more about ERP and how it helps here. The computation is a second to the computation of the performance seeking. You can read more about ERP and how it helps here. The computation is a second to the computation of the performance seeking. You can read more about ERP and how it helps here. The computation is a second to the computation of the comp
good understanding of what is happening puts you in control and ready to take steps to overcome intrusive thought. Should you wish to continue reading my articles, you can find more on the subject here. Further reading ADAAMINDReferences Cambridge Dictionary Radomsky, Adam & Alcolado, Gillian & Abramowitz, Jonathan & Alonso, Pino &
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of exposure and response prevention in the treatment of obsessive-compulsive disorder: A meta-analysis. Behavior Therapy, 27(4), 583-600. Sometimes, an absolutely shocking thought crosses your mind, seemingly out of nowhere, like envisioning punching someone or letting your car veer into traffic. Understandably, such thoughts catch you by
surprise, causing alarm and concern. You need to know: Why would these horrible scenarios even enter your head?! They're called intrusive thoughts, says psychologist Lauren Alexander, PhD, and they're not uncommon. Here's what they can look like and where they may stem from. What are intrusive thoughts? "Intrusive thoughts are thoughts, says psychologist Lauren Alexander, PhD, and they're not uncommon. Here's what they can look like and where they may stem from. What are intrusive thoughts? "Intrusive thoughts are thoughts, says psychologist Lauren Alexander, PhD, and they're not uncommon. Here's what they can look like and where they may stem from. What are intrusive thoughts?"
images or urges that are unwanted but pop into your mind anyway," Dr. Alexander reports. "Though intrusive thoughts are often discussed in relation to obsessive-compulsive disorder (OCD), anyone can have them. Here are some of the ways they may appear: Specific thoughts can crop up at
random or in response to other situations. For example, if your parent gets ill, you might persistently worry about them dying. Images are scenes that play out in your mind, like if someone cuts you off on the highway and you vividly envision running them off the road. Urges are pressing thoughts that you should do something you don't actually want
to do, like if you dislike your job and feel compelled to walk out the door and never return. Importantly, the more you try to ignore an intrusive thought or push it away, the more likely it is to stick in your mind. Per the American Psychological Association's definition, intrusive thoughts "interrupt the flow of task-related thoughts in spite of efforts to
avoid them."Examples of intrusive thoughtsThough this certainly isn't a comprehensive list of types of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts, it may help you better identify and label your own. DoubtsThis is the most common category of intrusive thoughts.
 "Am I sure I locked the garage door?" or "I could've bumped into the stove accidentally turning it on before I left home"). EmbarrassmentYou might experience persistent worries about doing something humiliating in front of other people, like falling down the stairs, blurting out something inappropriate at work or farting during yoga class. Hurting
yourselfThese intrusive thoughts can arise even if you've never had suicidal ideations or seriously considered hurting yourself. For example, you could be cutting vegetables and suddenly imagine stabbing your hand. Or while standing over a beautiful scenic overpass, you imagine what it'd be like to jump. Hurting someone elseViolent intrusive
thoughts can be deeply distressing and at odds with your values and intentions, making you think about things you'd never do, like slapping a stranger or committing a terrible crime. One study found that 70% to 100% of new moms had intrusive thoughts about something bad happening to their baby; half envisioned being the one to cause that
 harm.Health concernsIntrusive thoughts about "contamination" can cause you to obsess over germs or illness, even when the risk is low — for example, "If I touch that elevator button, I might get sick" or "The doctor says I just have a cold, but what if it's actually cancer?"Negative self-talkNegative self-talk like "I'm such a loser" and "Nobody even
likes me" are types of intrusive thoughts that can both stem from and contribute to low self-esteem. Unwanted sexual thoughts that are taboo, violent, harmful or otherwise upsetting. These thoughts can be especially difficult to discuss with others,
including a therapist, because of the stigma associated with them. Traumatic memories fyou've experienced a traumatic event in your past, like a car accident, deployment, sexual assault or natural disaster, intrusive thoughts are common with post-
traumatic stress disorder (PTSD). Sin and immorality Cultural and faith-based intrusive thoughts can be so surprising and upsetting, it can feel like there must be a reason for
them. But that's not always the case. "Sometimes, they're completely random, and you go, Wow, where did that come from?" Dr. Alexander shares. Ever wondered what it would feel like to fly or what you'd look like with rainbow-colored hair? These out-of-the-blue thoughts are harmless, so they don't stop you in your tracks like intrusive thoughts do.
But they don't really originate anywhere either, illustrating the fact that sometimes, unexpected thoughts can stem from other conditions, too: Stress. Disruptive events like work stress, a breakup or a move can prime you for intrusive thoughts. "If you've got any variety of stressors in your life, you may be more
prone to getting stuck on these thoughts," Dr. Alexander says. Anxiety can complicate your emotions. "Intrusive thoughts are often related to something you're anxious about," Dr. Alexander confirms. "And anxiety is a sticky emotion. If you're anxious about one thing, it's very easy to get anxious about other
things."OCD. This condition is characterized in part by obsessions, which are unwanted, intrusive thoughts are also associated with mental health conditions, like generalized anxiety disorder, ADHD, major depressive disorder and eating disorders. "Having multiple
mental health issues can make it harder to manage intrusive thoughts," Dr. Alexander notes. "Just like we all have a finite amount of money and time, our mental and emotional resources are the same way." Lack of sleep. The less sleep you get, the more likely you are to experience intrusive thoughts, probably because you're too mentally depleted to
rationalize, focus and stay on task. Ultimately, this can increase your risk of developing an anxiety disorder or other mental health conditions. Hormonal imbalances. Shifting levels of estrogen and progesterone can cause issues like sleep disruptions and mood changes, which some people say bring intrusive thoughts during ovulation, menstruation,
pregnancy, perimenopause and menopause. Are intrusive thoughts normal? Yes. One study found that nearly 94% of participants experienced at least one intrusive thoughts doesn't say anything about your character or your values. In the moment, thinking something scary or disturbing can
make you feel deeply ashamed. But having a thought doesn't mean you want to act on it. Remember: A hallmark of intrusive thoughts is that they're unwanted. They're unwanted to take, "People often believe that if they have a thought, it's true—and that if they keep thinking it over and over again
then it's especially true," Dr. Alexander acknowledges. "But just because you have a thought doesn't make it true. Unless you act on it, it doesn't have any bearing on reality." Fortunately, there are steps you can take to stop intrusive thoughts and let them pass you by. Strategies like mindfulness and grounding techniques, along with psychotherapy,
can help. "You can't change anything that's led up to the moment you've had this intrusive thought," she continues, "but you can respond differently to it so that it doesn't become more of an issue than it actually is. It's just a matter of finding and using the right strategies to help you cope." If you're worried for your safety or the safety of others, seek
immediate help by calling 911 or your local emergency hotline. In the U.S., you can also call or text the 988 Lifeline. Have you ever had an unwanted thought or image stuck in your head? Usually, you can ignore it and move on. But sometimes, it just keeps popping right back up. You don't want to have these sticky, uncomfortable thoughts. So why do
they happen to you? They're called "intrusive thoughts," and nearly everyone has them from time to time. They can range from random images to disturbing and violent ideas such as punching someone in the face or hurting yourself. Many people have intrusive thoughts now and then. If they cause you a lot of anxiety and affect your daily life, it's a
good idea to get professional help. (Photo credit: Westend61/Getty Images) They're usually harmless. But if you obsess about them so much that they interrupt your day-to-day life, this can be a sign of an underlying mental health problem. Intrusive
thoughts can come in many forms. Sexual thoughts. It's natural to often have sexual thoughts. When you feel uncomfortable with or shocked by such them away. Experts say it's best to remind yourself that these are just passing, automatic thoughts. They don't define you in any way. Violent
thoughts. Your thoughts may have dark or violent themes such as hurting yourself or someone else. Often, they're just harmless, repetitive thoughts that you have no intention of acting on. You don't even want them in your head. And they'll pass in time. But if you find yourself planning to follow through on your aggressive thoughts, you need
professional help to manage your emotions. Talk to a doctor or a therapist. Negative or self-doubt thoughts. Sometimes, when things don't work out as planned, you might think of yourself as a "loser" or feel you're not good enough. These thoughts should fade as your situation changes. But if they become overwhelming, you could have depression or
anxiety. Talk to a mental health professional about how to control your symptoms. Health-related thoughts. Contamination fears are a common type of intrusive thought. You may think about coming into contact with germs that can make you sick such as when you have to touch a doorknob in public, have sex with someone, or when you're around dirt
or other things out in nature. Religious thoughts. You may constantly worry that the way you think is impure or sinful. Your thoughts may include doubt in your beliefs or fear that you may anger or offend your higher power in some way. Sacred images or phrases may pop into your mind all the time. Public humiliation thoughts. You may have thoughts
that you'll do or say something embarrassing or inappropriate in public, such as swearing, having sex, or exposing yourself. Death or suicidal behavior (such as cutting yourself). Intrusive thoughts of self-harm may often be the opposite of how you actually feel. But if you think
you might hurt yourself, call or text 988 Suicide & Crisis Lifeline right away. Thoughts about the safety of yourself and loved ones. You may think about all the ways you or your loved ones might get hurt. This may include situations in or out of your home. Trauma-related thoughts. Images or memories of bad things that have happened to you in the
past may pop into your mind. These thoughts and emotions may be unpleasant enough to interrupt whatever you're doing. Other types of intrusive thoughts. You have no control over them, and most of the time, they have no meaning or relevance in your life. It's
best not to take them personally or pay much attention to them. But if they last a long time, or you keep having episodes of them, talk to your doctor to rule out an underlying mental disorder. Yes. According to one global survey, 93% of participants reported having at least one intrusive thought over 3 months. This holds true for folks with or without a
diagnosed mental health condition. They only become a problem when they interrupt your daily life or cause a lot of anxiety. At the end of the day, most intrusive thoughts are just thoughts. They're not a red flag or a signal that you actually want to do those disturbing things. If they bother you, you can take steps to cut down on their frequency and
intensity. You can: Recognize and label them for what they are -- intrusive thoughts that you can't control. Just let them stay, instead of trying to push them away. Accept that they will pass eventually. Give yourself time for them to fade away. Prepare yourself to come back. Continue to do whatever you were doing when the
intrusive thoughts flooded your head. Don't: Act or engage with these random, repetitive thoughts. Try to guestion why you're having them in the first place. Look for meaning behind them. Try to stop them. If you do this, you may fixate more on them. This can be hard to do. But over time, being less sensitive to intrusive thoughts can reduce the
emotional effect they may have on you. It also helps you feel more in control of them. Your brain thinks all the time, and you may have intrusive thoughts for no clear reason. But they often pop up due to stress, anxiety, lack of sleep, or after big changes in your life or body. For instance, people who've recently given birth often have an increase in
intrusive thoughts about the safety of their baby. Some experts think intrusive thoughts are a kind of warning signal from the brain, which may help explain why these thoughts tend to be about scary, violent, or embarrassing things. The idea is that your brain brings dangerous things to the forefront of your mind so you can prevent them. Take the
new parent example. A mom may see a disturbing flash of harm coming to her baby precisely because she doesn't want that to happen. Sometimes, intrusive thoughts can be a symptom of a mental health condition, such as: Obsessive-compulsive disorder (OCD). With this type of anxiety disorder, you may have repeated, unwanted thoughts that are
scenario of any situation, or what someone is thinking about you. Postpartum depression or OCD. New parents with postpartum depression or perinatal OCD may notice a rise in intrusive thoughts. Examples include disturbing flashes of hurting your own baby or harm coming to your child in another way. Note: These are different from psychotic
thoughts where you have a strong desire to hurt your baby. Posttraumatic stress disorder (PTSD). People who have PTSD often relive traumatic memories. These flashbacks may be so vivid that you can see, taste, smell, or hear sounds related to your trauma. Certain people or situations may trigger these intrusive thoughts or images. Other mental
two.Other health conditions that may lead to intrusive thoughts include: Brain injury. Rarely, traumatic brain injury (TBI) may change the way you think and act in a way that causes symptoms associated with OCD and vice versa. More research is needed to
know for sure. Alzheimer's disease and other dementias. These can affect how your brain works and may raise your chances of getting intrusive thoughts, OCD, or other mental health conditions such as Tourette's syndrome or epilepsy. If intrusive
thoughts take up a lot of your energy, cause you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them. Your health care provider can help you distress, or make it hard to go about your day, don't be embarrassed to tell your doctor about them.
get you to the right specialist, your doctor will give you a physical exam and ask about your symptoms. Your provider may give you a mental health questionnaire or other tests to learn more about how you're feeling. Expect to answer questions such as:Do your thoughts get in the way of your social life, work, and family responsibilities?How many
times a day do you have intrusive thoughts?Do you do things to relieve the anxiety around your thoughts?Do you been diagnosed with a mental health condition before?If necessary, your regular doctor may refer you to a psychologist or
psychiatrist. These are mental health specialists trained to diagnose disorders causing intrusive thoughts and help guide you toward the best treatment to manage your symptoms. If you're thinking of hurting
yourself, call the National Suicide Prevention Hotline at 800-273-TALK. Or you can text "MHA" to 741-741. This will connect you to a trained counselor from the Crisis Text Line. No matter how serious your symptoms are, there are ways to manage intrusive thoughts. You may need medication, talk therapy, or a mix of both. Treatment for intrusive
thoughts may include: Cognitive behavioral therapy (CBT). This is a type of talk therapy that helps you identify and change unhelpful thoughts may include: Exposure and response prevention (ERP). In a safe space, your therapist gradually
exposes you to whatever is triggering your intrusive thoughts. For example, they may have you touch something dirty and not let you wash your hands afterward if you have a fear of germs. Acceptance and commitment therapy (ACT). A therapist helps you see your thoughts as a natural part of your life that you can't control. ACT may not get rid of
your intrusive thoughts, but it may help lessen your anxiety and distress around them. Medications. Your doctor may prescribe antidepressants, including selective serotonin reuptake inhibitors (SSRIs). These drugs are used to treat conditions such as depression and anxiety, but if you have OCD, you may need a higher dose than what's recommended
 for other disorders. Mindfulness techniques. These are exercises that help you sit with your thoughts without judging them. Certain techniques teach you how to relax, focus on the present moment, or engage with your senses, including:MeditationYogaBeing kind to yourselfDiaphragmatic breathingGrounding techniquesWith the 5-4-3-2-1 grounding
technique, you may lessen the anxiety around your intrusive thoughts. This technique requires you can focus on:5 things you can tector or therapist if there are other steps you can take to manage the stress and anxiety stemming from your
intrusive thoughts. They may suggest more advanced techniques such as brain stimulation. Intrusive thoughts happen to almost everyone at some point. These random thoughts or images can be confusing, disturbing, or scary, but they're usually nothing to worry about. But you should tell your doctor if they bother you or get in the way of your daily
life. A mental health professional can help you find the best treatment to manage your symptoms. What are examples of intrusive thoughts? Thoughts about jumping off a rooftop when you're standing on top of a tall building, driving your car off the road, or doing something embarrassing such as swearing in public. You may also have violent thoughts?
about hurting yourself or other people, such as pushing a stranger in front of a train or harming your baby if you're a new parent. How do I get rid of intrusive thoughts (or images) pop into everyone's head from time too. I get rid of intrusive thoughts? Recognize them and try to figure out what they mean, but don't try to control them.
time. Talk to a mental health professional if you're having trouble getting rid of intrusive thoughts or if they scare you. Treatment with cognitive behavioral therapy or medication can help. What causes intrusive thoughts now and then. These thoughts may show up for no obvious reason. But you may notice
them more often (or be bothered by them) when you're stressed or if you have a mental health condition such as anxiety, depression, or obsessive-compulsive disorder. You're going about you're talking to someone, and you suddenly picture yourself
punching them in the face. Or you can't stop picturing random people naked. You don't want to think about this stuff, so why does it keep happening? These are called intrusive thoughts, and move on. But sometimes, intrusive thoughts can get
out of hand. If your thoughts are causing you a lot of distress or getting in the way of your daily life, it could be a sign of a mental health condition. Seeking treatment can help you learn to manage the thoughts. Let's look at a few different types of intrusive thoughts, and what they might mean. Thinking about hurting yourself or someone else
Sometimes intrusive thoughts can be violent. You might think about hurting yourself or someone else. Usually, there's no intent behind it—you don't actually want to do those things; it's just a random thought that pops into your're thinking abou
it so much. Thoughts like these may be a sign of an anxiety disorder, such as obsessive-compulsive disorder (OCD). People experiencing postpartum depression may have intrusive thoughts, or if you're already acting out, that's beyond intrusive thoughts. If you're
having trouble controlling aggressive behavior, you'll need to learn how to manage your emotions in a more constructive way. If you need immediate help, you can also text "MHA" to 741-741 to reach the Crisis Text Line. Warmlines are are
excellent place for non-crisis support. Intrusive sexual thoughts Most people—regardless of gender—think about sex quite a bit [2]. It's completely natural. But if you're ashamed of these thoughts are just thoughts—even if the thoughts are
shocking or frequent, they don't define who you are as a person. It's also common for people to have intrusive thoughts about their sexual or gender identity. Working out your identity can be a long and difficult process. It can be stressful, and it makes sense that you'd be thinking about it a lot. But it's also common for people with OCD to obsess over
thoughts that don't seem to line up with their identity [5]. For example, you might identify as lesbian, but have intrusive thoughts about sex with a man. Negative self-talk Negative thoughts like "I'm such a loser," or "I'll never amount to
anything." The emotion behind these thoughts can be so strong that they feel like facts, rather than intrusive thoughts often fall into common patterns, called thinking. One way to deal with them is to reframe them—find new, more
positive ways of thinking about the same situations. Click here for a list of common thinking traps and ways to reframe them. Delusional thoughts If your thoughts are bizarre or paranoid, you might be experiencing signs of psychosis. For example, you might feel like the FBI is watching everything you do, or that someone is trying to poison you. You
might even see or hear things that no one else does. Psychosis can be a sign of a mental illness like schizophrenia or bipolar disorder. Sometimes drugs can also cause psychosis. Other intrusive thoughts These are just a few of the most common types of intrusive thoughts. There are many more. The important thing is to realize that intrusive thoughts are just a few of the most common types of intrusive thoughts.
are something that happens to you, not something that defines you. If you think you might be experiencing any of the types of mental illness discussed here, take one of our mental health tests to find out if you're at risk. Show References Radomsky et al. (2014). Part 1—You can run but you can't hide: intrusive thoughts on six continents. Journal of
Obsessive-Compulsive and Related Disorders 3(3), pp. 269-279. Retrieved from Fisher et al. (2011). Sex on the Brain?: An Examination of Frequency of Sexual Cognitions as a Function of Gender, Erotophilia, and Social Desirability. The Journal of Sex Research 49(1), pp. 69-77. Retrieved from Weingarden & Renshaw. (2014). Shame in the obsessive
compulsive related disorders: A conceptual review. Journal of Affective Disorders 171(15), pp. 74-84. Retrieved from Williams & Farris. (2010). Sexual orientation obsessions in obsessive-compulsive
disorder: prevalence and correlates. Psychiatry Research 187(1-2), pp. 156-9. Retrieved from 2Fj.psychres.2010.10.019 You're going about your day, and suddenly picture yourself punching them in the face. Or you can't stop
picturing random people naked. You don't want to think about this stuff, so why does it keep happening? These are called intrusive thoughts and move on. But sometimes, intrusive thoughts can get out of hand. If your thoughts are causing you a
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identity [5]. For example, you might identify as lesbian, but have intrusive thoughts about sex with a man. Negative self-talk Negative self-talk Negative sout yourself are a common symptom of depression. When you're feeling down, it's easy to get stuck on thoughts like "I'm such a loser," or "I'll never amount to anything." The emotion behind these thoughts
can be so strong that they feel like facts, rather than intrusive thoughts. Negative thoughts often fall into common patterns, called thinking traps. These are mental shortcuts we take that can lead us to get stuck in our negative thinking about the same situations.
Click here for a list of common thinking traps and ways to reframe them. Delusional thoughts If your thoughts If your thoughts If your thoughts are bizarre or paranoid, you might even see or hear things that no one else does.
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Psychiatry Research 187(1-2), pp. 156-9. Retrieved from 2Fj.psychres.2010.10.019 You're going about you're hit with a thought that's bizarre, uncomfortable—even shocking. Maybe you're talking to someone, and you suddenly picture yourself punching them in the face. Or you can't stop picturing random people naked. You
don't want to think about this stuff, so why does it keep happening? These are called intrusive thoughts, and just about everyone has them from time to time [1]. Usually, people are able to ignore these thoughts are causing you a lot of distress or getting in the way
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emotions in a more constructive way. If you need immediate help, you can reach the Suicide & Crisis Lifeline by calling or texting 988 or using the chat box at 988lifeline.org/chat. You can also text "MHA" to 741-741 to reach the Crisis Text Line. Warmlines are an excellent place for non-crisis support. Intrusive sexual thoughts Most people—
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156-9. Retrieved from 2Fj.psychres.2010.10.019 What are they?TypesMythsCausesTreatmentDiagnosisSeeking helpSummaryIntrusive thoughts are sudden, involuntary thoughts are sudden, involuntary thoughts. They can be distressing, and people may feel they have little control over them. They commonly occur with conditions such as anxiety and obsessive-compulsive disorder
(OCD). Although everyone may occasionally experience sudden thoughts that can be distressing or uncomfortable, some individuals experience trequent, involuntary thoughts that cause great stress and anxiety. When intrusive thoughts are a common occurrence that disrupts a person's daily life, they may be due to a mental health condition. In this
article, we discuss what intrusive thoughts are unwanted to the unwanted thoughts are unwanted thoughts are unwanted to the unwanted to th
daily tasks. Intrusive thoughts are among the symptoms of post-traumatic stress disorder (PTSD) anxiety depression OCDThe thoughts can be explicit, which can lead to people keeping them secret. People may not seek help because they feel ashamed. Intrusive thoughts can be persistent and cause significant distress. Often, the harder people try to rid
themselves of these thoughts, the more they persist and the more intense they become. There are many types of intrusive thoughts, including the following: Intrusive thoughts the following: Intrusive the following: Intrusive the following: Intrusive the following: 
members of their familyfears regarding their sexual orientationPeople may worry about their relationships, and intrusive thoughts can place a strain on them. Examples of this type of intrusive thought can include: analyzing the strength of their feelings for their partner obsessively and finding faultconstantly seeking reassurance from a
partnerobsessive thoughts about a partner leaving the relationship doubts regarding fidelityTypes of intrusive thoughts about religious buildingrepeating certain prayers continuallyfearing they have lost touch with their faith or beliefsconstantly analyzing their faithA person may experience
thoughts about being violent toward themselves or others. Common thoughts include: harming loved ones or childrenkilling othersusing knives or other items to harm others. ideas about perfectionism, such as being unworthy of love if a
person does not achieve a "perfect" bodyobsessive fears about gaining weightinaccurate and intrusive thoughts about appearancea preoccupation with eating, avoiding eating, avoiding eating, avoiding eating may be a ritual they use to manage intrusive
anxious thoughts. Some myths surround intrusive thoughts. These include: Fact: People do not want to act on their intrusive thoughts is that they might lead to action. People experiencing these thoughts typically work hard to fight them, which
results in the thoughts becoming persistent. The thoughts are at odds with the desires or beliefs of the person thinking them. Fact: Thoughts do not always have a significant meaning People do not have to see every thought as a sign or warning about something. Despite how these thoughts can make a person feel, they do not carry meaning or
desire. Anyone can experience intrusive thoughts, and not all people who do so have a diagnosis. Some potential causes include: Anxiety disorders
experience some of the same symptoms they experienced during the trauma. Eating disorders may have intrusive thoughts of food. A person does not have to live with intrusive thoughts. Various treatment options they experienced during the trauma. Eating disorders may have intrusive thoughts of food. A person does not have to live with intrusive thoughts of food. A person does not have to live with intrusive thoughts.
can help. Another option is medication. Medications for OCD might include selective serotonin reuptake inhibitors (SSRIs) or other antidepressants, such as clomipramine. Although people typically use SSRIs to treat depression, these drugs can also help with OCD symptoms. Antidepressants can take 8-12 weeks to start working. The ADAA offers
some tips for dealing with intrusive thoughts, including:identifying the thoughts as intrusive clarifying that they are involuntary and irrelevant to daily lifeaccepting that the thoughts may return practicing meditation or mindfulness person should try to
avoid:pushing the thoughts awaytrying to figure out what the thoughts and their frequency. They will also ask whether a person has a family history of mental health conditions. They may refer the person to a mental health specialist who will
check for symptoms of a mental health disorder. For example, they may ask about compulsive behaviors that indicate OCD. Many people will experience unwanted and sudden thoughts at some point. Occasional intrusive thoughts that
cause distress should contact a doctor or therapist. A healthcare professional can help the person understand what is causing the thoughts are unwanted and involuntary thoughts that are usually disturbing in nature. People experiencing these thoughts do not act on them and often find them distressing.
Intrusive thoughts are sometimes due to an underlying mental health condition. In other cases, their cause is unclear. Treatment for an underlying condition might help reduce the intrusive thoughts. DepressionMental HealthAnxiety / StressPsychology / PsychiatryMedical News Today has strict sourcing guidelines and relies on peer-reviewed studies,
academic research institutions, and medical journals and associations. We only use quality, credible sources to ensure content accuracy and integrity. You can learn more about how we ensure our content is accurate and current by reading our editorial policy. Bang, L., et al. (2020). Presence of eating disorder symptoms in patients with obsessive-
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