

The Herald News

Fall River, Ma

OVERCOMING OCD: How Case High standout Ben Monteiro took back control of his life



Ben Monteiro and his mother, Bridget, seen at their Swansea home.

By Greg Sullivan
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Swansea — This was no game.

Two years ago, Ben Monteiro had reached his breaking point. It was the summer between his sophomore and junior years at Case High School and Ben had already established himself as one of the better athletes at the same school where his father, Joe, and uncle, Bob Monteiro, had been successful multi-sport athletes.

But as good as he was at sports (especially baseball), Ben was not enjoying life as a teenager.

How could he when he lived in fear of stepping on a crack in the sidewalk? If he accidentally kicked a clump of dirt or a rock while walking, he had to go back and fix it. Obsessed by thoughts ranging from fear of failure to death, an extremely anxious Ben could cope only by performing compulsive behavior, much of it involving repeated touching of objects.

He was (and is) suffering from obsessive-compulsive disorder. On mayoclinic.com, OCD is defined as "an anxiety disorder characterized by unreasonable thoughts and fears (obsessions) that lead you to do repetitive behaviors (compulsions). With OCD, you may realize that your obsessions aren't reasonable, and you may try to ignore them or stop them. But that only increases your distress and anxiety. Ultimately, you feel driven to perform compulsive acts in an effort to ease your stressful feelings."

Ben Monteiro was caught in that trap.

The Case 2011 male athlete of the year, Ben recalls one of the worst episodes he endured during his struggles with OCD. It came during that nightmare sophomore year, during MCAS testing in the spring, back in the days when he said he dreaded getting out of bed every morning.

After a comparatively enjoyable freshman year, the perceived pressure doing well in high school academically and athletically had triggered high-octane anxiety.

The OCD bubbled over at MCAS time. Ben estimates that over the three nights before each MCAS testing day, he got a combined four hours of sleep.

"I would be up from 11 p.m. to 6 in the morning, touching certain places on the wall, closing doors, because voices were telling me I wasn't going to do well," he says.

Even playing baseball, which he loved, became a negative, and for nothing having to do with hitting, throwing or catching the ball. Rather, his OCD made the seemingly simple task of going to the locker room, getting changed, and then getting onto the field promptly a virtual impossibility. "It would take me forever to get out on the field," he says. "I was late. It was like that every day. That's when it really killed me."

Repeated touching of objects was one of Ben's trademark compulsive behaviors. On one level he knew it was odd, illogical. But the urge was too strong to resist. The OCD monster — which he estimates was born when he was about 5 — had grown into Godzilla.

He says his friends were great to him, never being mean with their teasing, doing nothing bad and helping him as much as they could.

Ben's parents, Bridget and Joe, tried desperately to help, tried to encourage him to ignore the monster in his brain.

"I know it was tough on them," he says. "I wanted to listen to them. I really did. But the obsession becomes more powerful than their words."

Bridget Monteiro first noticed "different things" about Ben when he was in third grade.

"While waiting for the bus one morning," she says, "he kept moving the pitch back, back and forth. I asked him what he was doing and he said 'The guy keeps telling me to move it.' As a young child, he always referred to his OCD as 'the guy.'"

As the years passed, the "guy" became a frightening, unwanted, and permanent guest of the Monteiro household in Swansea as Bridget searched, mostly in vain, for information on young children with OCD. Meanwhile Ben's litany of rituals grew.

Up all night touching the bannister; turning lights on and off; opening doors; retrieving balls that he hit in the woods and placing them back in the same exact spot; touching every plate in the kitchen before he got out; standing at the bathroom threshold, stiff as a board, unable to move; finding the exact shirt to wear in the morning that made him feel OK; coming in and out of a room uttering the same phrase over and over again.

The OCD soon found its way into Ben's school life. Feeling unable to physically get out of his seat, not letting go of a door handle, or touching it a thousand times; writing the same answer over and over again.

Though his OCD would often keep him awake at home until 5 a.m., Ben refused to miss school because that would break a ritual.

"One of the scariest days for me was when I saw him with his shirt off and he was covered in black and blue marks," Bridget says. "I thought he had leukemia. It was from punching himself to make the voice stop.

"That's when I lost it and the doctor search began intensely. We saw a total of eight psychologists, but none of them truly knew what to do. I must give tons of credit to our family GP, Mark Ringiweicz. He supported us all the way."

It was 2009 and Ben's OCD continued to gut joy from his life. He had seen numerous doctors, been on more than a dozen medications, and was losing the fight. On an OCD severity scale of 1 to 10, Ben says he had crashed to a 9.5.

Frustrated and burdened with a mother's sadness, Bridget, a speech pathologist in the Swansea school system, refused to surrender. A colleague mentioned **McLean Hospital** in Belmont, a Harvard University-affiliated facility specializing in OCD treatment and research. The facility had a three-year waiting list, Bridget says, and the hospital's OCD Institute had never accepted anyone younger than 19. Ben was 16. But having seen that ray of hope, Bridget would not be denied. She wrote letters. She made phone calls. She was her son's super-advocate. After Bridget's repeated contact with the intake coordinator, Ben was finally accepted.

"She's helped me the most," Ben says of his mother. "Without her I wouldn't be talking to you."

McLean wasn't just another visit to a doctor. It was a six-week stay — in the summer. "I was upset. I said 'I don't want to do this,'" Ben says. "My mom was upset. My dad was upset."

"I never looked back but left my heart on that doorstep when I walked away and left him looking scared to death with total strangers," Bridget says. "It was the worst day of my life."

The first week at McLean, Ben was given an assignment. He had to read, something, he admits, he rarely did. "I read about the treatment. I studied the treatment. The stuff I had to do was weird, but I eventually got it."

Part of what he read about was a behavioral therapy called exposure and response prevention, or ERP.

According to the hospital's website, the "behavioral program identifies target obsessions, compulsions and avoidance behaviors, provides a menu of exposures for staff to implement and recommends special instructions for each patient. In addition to individual meetings with the behavioral therapist, the patient also engages in twice daily, two-hour exposure and response-prevention exercises."

In short, Ben said, in ERP the patient doesn't try to fight the obsessive and compulsive behaviors but rather performs the behavior in a controlled setting and then walks away from it. This is done over and over.

The compulsive behaviors are dealt with first, then the obsessions. "They had me touching certain things and then leaving the room," Ben says.

This strategy, he says, ultimately morphs the compulsions and obsessions from something desirable to something boring, essentially diffusing the OCD bomb.

For a kid who had struggled with OCD for a decade, improvement came relatively rapidly. Three weeks into Ben's stay at McLean, his older brother, Tom, whom Bridget describes as "a Godsend" in Ben's recovery story, was allowed a visit.

"He told me, 'You look so much better. You didn't do any of your rituals,'" Ben says.

"They (McLean staff) were our lifesavers," Bridget says. "When we finally got him into the OCD institute, I was so relieved hoping it would be the magic place ... and it was. Ben still takes medication daily. He may need to for the rest of his life. But where he is now, compared to two years ago, is a new beginning."

These days, Monteiro happily says his OCD severity has dropped from a 10 to a 1. He describes it as controlled.

"There are millions of people who have (OCD) worse than me," he says.

"After his sophomore year, there was noticeable improvement," says father Joe, who doubled as Ben's baseball coach at Case. "On the field. In his life. Being social. He was playing back at the level he used to. It's a credit to him to fix it all."

Ben still takes medication (Lexapro) daily, still visits Fall River psychologist Paul Donnelly, and still employs ERP.

Where he once needed a therapists and then family to help do the ERP, Ben now employs those strategies himself. For example, he says, he might walk outside and tear a leaf or kick something over and then just continue on into the house. He knows it doesn't sound like much. He also knows it's part of his successful behavioral strategy.

Last summer, Ben and Bridget traveled to Cape Cod to attend a book signing by Ed Zine, author of "Life in Rewind." The book is about the Falmouth resident's experience with a mindboggling case of OCD, a case so severe Zine didn't leave his father's basement for almost three years. Zine subsequently learned to control his OCD, married, and had two children.

"It was as if Ben met his long lost brother," Bridget says. "An amazing human being. It was life changing to meet him. It gave me such hope for Ben in so many ways."

Anyone who follows the sports section of this newspaper has likely come across Ben's name in stories, headlines, pictures and videos.

This year he was a Herald News all-scholastic honorable mention in basketball. From there it was on to baseball. All he did there was to post a 7-2 pitching record and bat .500 with eight home runs and 10 doubles. He struck out once in 66 at-bats, against Greater New Bedford Regional's fine pitcher, Cory Hamel. Ben homered off Hamel in his next at-bat.

A recent Case High graduate, Ben plays for the Somerset Post 228 American Legion Baseball team and works parttime delivering pizzas. He will next be taking his baseball and other talents to Massasoit Community College in Brockton, where the 504 educational plan (accommodations for students with a disability) he had in high school will carry over.

Baseball may be known as the national pastime. But there's a mother in Swansea, who will tell you the grand old game has been something much more important to her boy. "When you cannot help your child, or comfort and soothe him, it's torture," Bridget says. "It has been a long, long road. His salvation? His bat and ball."

A student of the game, Ben Monteiro can offer sound baseball advice. He'd be willing to show you how he grips the baseball for that effective cutter or how to keep that front shoulder tucked in while hitting.

But he would be even more excited to offer advice to fellow OCD sufferers, pointing them in the direction he took. The chance to possibly help other OCD sufferers was motivation to share his story.

His advice to fellow OCD sufferers would start with three letters.

"ERP. I'd say look it up, learn about it and do it," Ben says. "Find someone, anyone, who can help. A brother, mother, sister. This is what's going to get rid of it. Please stick to it."