STUDY OF ILLNESS BEHAVIOUR IN HYSTERICAL PATIENTS

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Thirty patients diagnosed as Conversion Disorder and Somatization Disorder on DSM-III were investigated using IBQ and EPI. The patients differed with the controls on all the 7 factors of illness dimensions. They scored higher on neuroticism and low on extraversion.

The concept of illness behaviour propounded by Mechanic (1972) and later on investigated by Pilowsky and Spence (1975) on patients of chronic pain is an important construct. The illness reporting constitute a major part of clinical practice. The illness reporting and adoption of sick role by an individual is governed by many factors. Pilowsky and Spence (1975) had isolated seven factors as dimensions of illness behaviour in the patients of chronic pain. Four of these factors were replicated by Varma et al. (1986). Earlier Pilowsky and Spence (1975) had opined that some of the psychiatric syndromes viz hysteria, hypochondriasis etc. are expressions of abnormal illness behaviour. In a study on hysterical patients Wilson-Barnette and Trible (1985), using Illness Behaviour Questionnaire reported high incidence of affective disturbance, characterized by affective inhibition, difficulty in expressing personal and emotional feelings and more denial.

The present study was aimed at studying the pattern of illness behaviour amongst the Hysterical patients and its correlation with certain personality dimensions.

MATERIALS AND METHOD

SAMPLE

The sample consisted of thirty psychiatric patients presenting with somatic symptoms, and who fulfilled the DSM-III criteria for Conversion Disorder (300-11) or Somatization Disorder (300-81). For comparison, thirty normal healthy persons, who were mainly the relatives of the patients attending the OPD, were chosen as controls. They were matched for age and sex with the patient group. There were 9 males and 21 females in experimental group and 11 males and 19 females in central group. Their mean ages were 23.4 (15-30) years and 24.7 (16-32) years respectively.

PROCEDURE

The subjects - the patients as well as controls - were investigated using the following tools:

(a) Illness Behaviour Questionnaire (IBQ):

A Hindi adaptation of the Illness Behaviour Questionnaire - a self rating instrument - was used to assess illness behavior in our sample. The IBQ consists of 56 items rated as 'Yes' or 'No' responses. The same seven factors as reported by Pilowsky and Spence (1975) using IBQ were considered for analysis.

(b) Eysenck Personality Inventory (EPI):

EPI, which measures Neuroticism and Introversion - Extraversion dimensions of the personality, was used to assess these in our sample.

(c) Statistical Analysis:

Since the responses on IBQ varied much and didn't appear normally distributed, a test for non-parametric analysis - the Median Test - was applied to evaluate the differences between the two groups. Analysis was carried to elucidate the inter-relationship among the factors. For EPI Student's 't' test was used.

OBSERVATION AND RESULTS

The two groups differed significantly on all the seven factors (Table-1) of IBQ. Almost all the IBQ factors showed a strong positive relationship among each other (Table-2).

The hysterical patients showed significantly more scores on neuroticism and less on extraversion scales of EPI (Table-3).
Table 1. Showing distribution of responses on Illness Behaviour Questionnaire

| Sr. No. | IBQ Factors                        | Hysterical Patients Median (Range) | Normals Median (Range) | $\chi^2$ |
|---------|------------------------------------|------------------------------------|------------------------|---------|
| 1.      | I. Phobic concern about Health     | 7 (3-9)                            | 2 (0-5)                | 27.84   |
|         | (hypochondriasis)                  |                                    |                        |         |
| 2.      | II. Disease conviction (symptom    | 4 (2-6)                            | 2 (0-4)                | 24.30   |
|         | preoccupation)                     |                                    |                        |         |
| 3.      | III. Somatic V/s Psychological     | 2 (0-3)                            | 1 (0-2)                | 15.15   |
|         | perception of illness              |                                    |                        |         |
| 4.      | IV. Affective inhibition            | 4 (1-5)                            | 2 (0-4)                | 19.28   |
| 5.      | V. Acknowledgement of anxiety &    | 4 (1-5)                            | 2 (0-3)                | 15.15   |
|         | depression                         |                                    |                        |         |
| 6.      | VI. Denial of life problems        | 2 (0-5)                            | 2 (0-3)                | 10.00   |
| 7.      | VII. Irritability                  | 3 (1-5)                            | 2 (0-3)                | 10.00   |

Table 2. Showing intercorrelations of Illness Behaviour Questionnaire Factors in Hysterical patients

| S. No. | IBQ Factors | I    | II   | III  | IV   | V    | VI   | VII  |
|--------|-------------|------|------|------|------|------|------|------|
| 1.     | I           | 0.936| 0.787| 0.889| 0.981| 0.751| 0.980|
| 2.     | II          | 0.148| 0.265| 0.878| 0.707| 0.859|
| 3.     | III         | 0.773| 0.774| 0.628| 0.729|      |
| 4.     | IV          |      | 0.890| 0.749| 0.913|      |
| 5.     | V           |      |      | 0.718| 0.915|      |
| 6.     | VI          |      |      |      |      | 0.770|

Table 3. Showing profile of Hysterical patients on Eysenck Personality Inventory

| S. No. | Dimension  | Hysterical Pts. Mean ± S.D. | Controls Mean ± S.D. | 't'   | 'p'   |
|--------|------------|-----------------------------|----------------------|-------|-------|
| 1.     | Neurotism  | 15.30 ± 5.21                | 7.73 ± 5.19          | 6.05  | < 0.01|
| 2.     | Extraversion| 12.27 ± 5.67                | 15.07 ± 3.17         | 2.35  | < 0.05|
| 3.     | Lie Scores | 3.37 ± 1.06                 | 3.16 ± 1.67          | NS    |       |

DISCUSSION

The hysterical patient presenting with bodily complaints are classified in DSM-III as conversion disorder and somatization disorder. The tendency to express emotional distress and discomfort in somatic terms is more among the less educated and lower class persons, in particular cultures, among the ethnic groups that discourage expression of emotions and among rural dwellers (Crandell and Dohrenwend, 1967). This also depends upon the concept of illness in the particular culture. The discomfort and disease in the
In the present study the patient group showed a pronounced tendency to view the psychological stress in bodily terms. This was evident by more phobic concern about the health, disease conviction and somatic perception of illness as compared to the control group. This confirms the long standing belief that cultural factors do influence the expression of emotional distress in body language. It is convenient and less threatening to express the somatic distress rather than emotional distress. The patient group showed more affective inhibition and denial of life problem than the controls. The findings correlate with those of Wilson-Barnette and Trible (1985).

On EPI the patients scored significantly higher on neuroticism and less on extraversion dimension of the personality. The high neuroticism scores in hysterical patients are not surprising.

The less extraversion scores, which are contrary to the generally held view correlate well with the finding on IBQ, that the patients were more inhibited and more preoccupied and with the self, having less expression of personal and emotional problems.

Our understanding of the patterns of illness behaviour can be utilized in the long term psychological management of the patients, where by tackling such factors as affective inhibition, denial of life problems, phobic concern about illness, etc, may facilitate better expression of emotion distress and amelioration of hysterical symptoms.

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