

Patterns and Issues in Multiaxial Psychiatric Diagnosis

by : JUANE. MEZZICH

Psychological Medicine, 9 : 125-137, 1979

There is a widespread and increasing interest in multiaxial models for psychiatric diagnosis which reflects a scientifically based challenge for the traditional single-label diagnostic model. The multiaxial model consists in the systematic formulation of a patient's condition according to separate clinical variables or aspects. This innovative model promises to improve diagnostic reliability and validity and involves many methodological challenges. The present paper reviews several multiaxial systems and compares them in an attempt to detect and illustrate major patterns and issues in multiaxial development and implementation. The author discussed many points : conceptualization of axial content, number and organization of axes, dimensional v. typological scaling of axes, evaluation of axial reliability and validity, and further development of multiaxial systems.

The author concludes that we are at a very active point in the development of innovative diagnostic systems. Also he suggests that much alertness, creativity and hard work to assimilate appropriately new substantive research findings in psychiatry. Lastly, the author pointed to the importance of the apparent increase in interchange of ideas and proposals formulated in various parts of the world.

R. M.

Deciding How to Treat-The Relevance of Psychiatric Diagnosis

by : PAUL WILLIAMS

Psychological Medicine, 9 : 179-186, 1979

A distinction is drawn between "diagnostic decisions" and "management decisions". The author suggests a hierarchical model for the process

of making a management decision. The three levels of this hierarchy are : the necessity of intervention, the setting in which intervention will take place, and the type of therapy. The relationship of diagnosis to each decision level is examined to come to the conclusion that psychiatric diagnosis does not strongly predict treatment. Accordingly, the author advocates the problem-oriented approach, as an extension, rather than a replacement, of diagnosis. A problem list is constructed on the basis of information. It might include : symptoms, social data, abnormal behavior, laboratory findings, etc. For each active problem, a goal is specified and a treatment plan devised. This approach serves, among other advantages, to remind the therapist that different conceptual models of psychiatric illness can be adopted for different problems within the same patient. However, the author states that "basing management on prevailing problems is not new".

R. M.

Psychophysiologic Disorders : A Critical Appraisal of Concept and Theory Illustrated with Reference to the Irritable Bowel Syndrome (IBS)

by : PAUL LATIMER

Psychological Medicine, 9 : 71-80, 1979

The author presents a critical review of the concept of psychophysiologic disorders and the major theories offered to account for such disorders. The Irritable Bowel Syndrome (IBS) serves to illustrate the application of each theory and provides a vehicle for their appraisal. The tendency to think of "physical" as separate entities rather than separate languages has led to attempts to make a categorial distinction between disorders caused by "psychological" factors and those caused by "physical" factors. This reflects the age-old mind-body dichotomy. Some of the theories invented to account for psychophysiologic disorders are unscientific and none can adequately account for all the features of IBS. The author concludes that the concept of psychophysiologic or

psychosomatic disorder is outmoded. Disorders could be named according to our current level of understanding (e.g. IBS) without implying aetiology, where this is poorly understood. "Psychological" as well as "physical" language could be used without implying separate events or aetiological significance.

R. M.

Suicide in Prison

by : D.O. TOPP

Brit. J. Psychiat. 134 : 24-28, 1979

Records of 186 suicides among male prisoners in England between 1958 and 1971 emphasize the differences between prison population and population at large. The suicide rate may well be three times greater. Suicide is most likely to be committed during the first few weeks in custody. Deaths occurred partly as a result of a demonstrative attention-seeking behaviour, 50 percent could have had some expectation of being saved, at least 50 per cent seem to have acted on sudden impulse, 47.3 per cent committed the fatal act during the daytime. These factors suggest that a number of the subjects may have been making attempts to elicit sympathetic attention, and when the desired response failed to occur they ended their lives.

Z. B.

Depression and Homicide : A Psychiatric and Forensic Study of Four Cases

by : S. HIROSE

Acta Psychiat. Scand., 59 : 211-217, 1979

Reports on the relationship between depression and homicide are rare. This paper presents four cases of completed homicide followed by attempted suicide. Three cases had suffered from unbearable states of

endogenous depression and the other one showed a serious chronic neurotic depression following an acute grief reaction before and during homicide. The author used his own psychiatric examinations prepared for the use of the courts. Case 1 killed her infant, Case 2 killed his wife, Case 3 hacked his wife and son to pieces, and Case 4 killed the assaulter who had killed his son in the traffic accident.

The relationship between depression and homicide is discussed from the standpoint of clinical psychopathology. Also, the author discussed the criminal responsibility of these cases.

R. M.

Personality of Violent Offenders and Suicidal Individuals

by : LIISA KELTIKANGAS-JARVINEN

Psychiatric Fennica, 57-63, 1978

The aim of the study was to investigate outward and inward directed aggression. The problem of research was to discover an explanation of the personality qualities of Violent Offenders and suicidal individuals. The frame of reference employed has been psychodynamic, with special emphasis on Kernberg's theory of narcissistic personality disturbances.

The subjects are 78 Violent Offenders from the Central Prison of Helsinki and 48 Suicidal patients From the Diurnal Clinic of the Helsinki University Central Hospital. Several psychological measurements and statistical analysis have been performed.

The results of this study point to the contention that violent offences and suicides are manifestations of the same type of psychic disintegration. The central personality characteristics of both groups were : narcissism, wounded self-esteem, paranoia and splitting. Suicidal subjects showed greater impulsiveness and affective and emotional potential. In addition,

they revealed a stronger impression of disturbance in the light of the projective tests. Violent offenders present very low capacity of experiencing emotions, especially the feeling of guilt. They are unable to stand depression and react to incipient melancholy with hate, rage and acting-out behavior. In addition, they exhibit specific disturbances on their object relationships. These individuals have particular need to be admired and most importantly they possess inadequate self-concept, in which the actual self-concept and ideal self-concept are fused.

R. M.

Psychiatric disorders in children in long-term Residential care. A follow-up study

by : S. WOLKIND AND G. RENTON

Brit. J. Psychiat., 135 : 129-35, 1979

Ninety-two children who had been examined in a psychiatric study of five to twelve year-olds in long term residential care were followed up four years later. Three quarters were still in children's homes but over half had been moved to different establishments. At both the original study and follow-up, the majority showed evidence of psychiatric disorder. Considerable continuity of behavioural pattern was found, particularly amongst those who originally had antisocial disorders, who were also most likely to have had changes of care-taker during the four years. It is suggested that the persistence of their disorder may be due to a vicious circle of unacceptable behaviour and adult rejection. Many of the staff of these homes understandably have difficulties in coping with the very disturbed children in their care.

Z. B.

Gilles de la Tourette Syndrome : Interactions with Other Neuropsychiatric Disorders

by : J.A. YARYURA - TOBIAS

Acta Psychiat. Scand., 59 : 9-16, 1979

In this report, the author describes two unique case histories. The first case showed Sydenham's chorea followed in its evolution by de la Tourette syndrome, while the other case was of de la Tourette syndrome with a grafted syndrome of primary anorexia nervosa. The first one could be interpreted as rheumatic encephalitis. They were successively treated; the former with combination of L - tryptophan, nicotonic acid and pyridoxine HCL, and the latter with chlorimipramine.

It is concluded that these two cases illustrate the possibility that one neuropsychiatric syndrome may include another during its evolution when the same anatomo-biochemical loci of the brain are involved.

R. M.

Diagnostic Accuracy in Presenile Dementia

by : M.A. RON, B.K. TONNE, M.E. GARRALDA
AND W.A. LISHMAN

Brit. J. Psychiat., 134 : 161-169, 1979

A follow up study of patients diagnosed as suffering from presenile dementia has revealed a high incidence of erroneous diagnoses. Of 52 patient, discharged from hospital with this diagnosis, information was obtained 5-15 years later on 51 patients. Eighteen were alive and the diagnosis was rejected in 16. A possible reason is the inadequate investigation. Thus of the 51 patients 9 were diagnosed without psychometry, 16 without contrast radiography and four without EEG. Non-organic psychiatric disturbance may be misinterpreted as dementia as affective disorder. And even among the patients with an organic component to the picture, a co-existing affective disorder was extremely common.

Z. B.

Averaged Evoked Responses in Relation to Cognitive and Affective state of Elderly Psychiatric Patients

by : E. HENDRICKSON, R. LEVY AND F. POST

Brit. J. Psychiat., 134 : 494-502, 1979

Averaged cortical evoked responses to auditory and somatosensory stimuli were recorded in elderly depressives, demented, patients with a combination of depression and dementia and normal elderly controls. They were given a battery of cognitive tests and clinical ratings at stated intervals. The latency of the auditory response was significantly longer in demented than in controls. Depressives had intermediate latencies which did not return to normal after recovery. Mixed cases were too few for separate statistical analysis but their latencies fell between the demented and the depressives. Significant correlations emerged between latencies of auditory responses and some cognitive tests. The delay in response to auditory stimuli may be a useful adjunct to diagnosis, in depressives it may reflect organic cerebral change playing a part in the emergence of depressive symptoms in old age.

Z. B.

The E.E.G. and Differential Diagnosis in Psychogeriatrics

by : K.P. O'CONNOR, J.C. SHAW AND C.O. ONGLEY

Brit. J. Psychiat., 135 : 156-62, 1979

The study was part of an intensive investigation of patients recently admitted to a geriatric assessment unit. Bipolar E.E.G.s were recorded from central, parietal, occipital and temporal areas in 24 elderly patients with a firm clinical diagnosis of senile dementia, senile arteriosclerosis or depression. Power and coherence spectra were computed on 20 second epochs recorded during eyes open, eyes closed and photic stimulation.

Significant group differences were reported in both power and coherence measures. Power results were uniform for all channels but coherence values differed significantly with derivation. The best discriminator between groups was E.E.G. coherence estimates between right parietal and temporal derivation. Correlations between clinical symptomatology and E.E.G. coherence supported the direction of the discrimination between groups.

Z. B.

Disturbances in Body Image Estimation as Related to other characteristics and outcome in Anorexia Nervosa

by : REGINA C. GOLDBERG, ELKE D. ECKERT
AND JOHN M. DAVIS

Brit. J. Psychiat., 134 : 60-67, 1979

Body image distortion in 79 female anorexia nervosa patients were examined on a Visual-Size estimation apparatus during the emaciated stage of illness. The anorectics perceived lips more accurately than other body parts whereas a fair amount of variation in accurately perceiving various body parts was present in their control group. Patients who vomited, over-estimated their size more than the non-vomiters.

The results suggest that a psychological defence mechanism such as denial plays a role in the conceptual integration of body image in anorexia nervosa. Among anorexia patients the degree of overestimation was associated with less weight gain during treatment, and several other pretreatment characteristics indicative for poor outcome.

Z. B.

A Comparative Study of parents of Emotionally Disturbed and Normal children

by : P. L. CHAWLA AND K. GUPT

Brit. J. Psychiat., 134 : 406-412, 1979

Parents of fifty children attending a child guidance clinic (clinic parents) were studied and compared with the parents of non-referred children matched on relevant parameters (control parents). The clinic parents differed significantly from the control parents on certain variables: presence of psychiatric morbidity in clinic mothers, disciplinary techniques used, attitude towards their own children and the marital relationship. There were no significant differences between the parents of two groups in their attitudes towards their own parents. Alcoholism and sociopathy were not common among clinic fathers.

Z. B.

Experience of Father and Later Relations to Men

by : N. UDDENBERG, I. ENGLESSON AND P. NETTELBLADT

Acta Psychiat. Scand., 59 : 87-96

Although there is a lot of clinical evidence that a woman's experience of her father is connected with her way of relating to men later in life, few systematic studies have been carried out. In this paper, data from a longitudinal, prospective study of 69 women, their partners and first-born children, the woman's description of her parents was compared with her report about her relationships to her partner and child. Information was independently collected from partner and child. The woman's way of relating both to her partner and to her son was more strongly connected with her report about her early paternal than with her report about her early maternal contact. The woman's experience of her father was related to her way of interacting with her child in the case of a son but not in the case of a daughter. These results emphasize the specific im-

portance of a woman's image of her father for her way of relating to other significant males. The findings have several implications for therapists working with families.

R. M.

High-Dose Propranolol in Schizophrenia

by : **GRAHAM P. SHEPPARD**

Brit. J. Psychiat., 134 : 470-477, 1979

Eight male schizophrenics were treated in an open study with D.I. propranolol (a B-adrenergic blocker). The dose was increased by 160 mg / day until a maximum of 2,400 mg / day was achieved on day 15, and this remained constant until day 21. Seven patients showed significant clinical evidence of psychiatric improvement, while the incidence of toxic side-effects was low. A main area of therapeutic change was the improvement in ward and social behaviour and the amelioration of anergia, lack of social interest and emotional withdrawal, which are symptoms integral to residual schizophrenia. If future studies confirm this beneficial effect on social behaviour and volition, this could represent an advance in existing pharmacological management.

Z. B.

Weight Changes with Depot Neuroleptic Maintenance Therapy

by : **A.W. JOHNSON AND M. BREEN**

Acta Psychiat. Scand., 59 : 525-528, 1979

Although a number of studies report weight gains during treatment with neuroleptic drugs, no prospective study specifically designed to evaluate weight change has taken into consideration all the important variables of diagnosis, mental state, the effect of other medication prescribed at the same time, and the relationship with neuroleptic dose.

The present paper presents a prospective study of schizophrenic patients put on injectable depot neuroleptic drugs as maintenance therapy.

The results showed a clinically significant weight gain in 55% of patients. No significant difference was shown between Flupenthixol decanoate, nor was a clinically meaningful relationship shown with dose, or the use of anti-parkinsonian drugs. Since this weight gain was shown to continue for more than 2 years following their most recent relapse, and was not related to mental state, it is unlikely to reflect recovery from illness and it must be concluded that this is substantially a drug effect. These results must suggest that the regular weighing of patients should be an essential part of the monitoring of patients prescribed depot neuroleptics as maintenance therapy for chronic schizophrenia.

R. M.

**Changes in Learning, Memory(and Mood During lithium
Treatment : Approach to a Research Strategy
by : D. KROPF AND B. MULLER-OERLINGHAUSEN**

Acta Psychiat. Scand., 59 : 97-124

Clinical experience shows that some patients who regularly take lithium report weak memory, a lack of ability to concentrate, and a tendency to more passive behavior. The subjects of the present study, which is a double-blind, were 24 healthy male volunteers put on lithium for 14 days. The effect of lithium on their mood, ability to learn nouns, and memory of the words learnt was measured after 2 hours and 14 days. Despite a relatively low mean plasma lithium level on the 14th day (0.54 ± 0.15 mmol/l), the lithium volunteers assessed themselves after 2 weeks of medication as significantly less relaxed, less active, less socially involved, more bored, and more tired than the placebo group. As regards learning, the lithium group revealed only a slight impairment of performance compared with the placebo group. As to memory, there was a significant difference in free recall over 2 weeks: the lithium group remembered fewer words than the placebo group. Additional motivation of free recall over 2 hours was ineffective. The authors presumed that the effect of lithium consists primarily in a reduced production of spontaneous activity. This could be interpreted as a change in the production of the characteristics of experience and behavior.

R. M.