

**Case Report**

# Right Side Body Tremor Presented as Dissociative Disorder in a 28 Years old Male Patient – A Case Report

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**Abstract**

A 28 year old unmarried male of 8<sup>th</sup> grade education with a 4 year old history of fluctuating course of symptoms of apparently unprovoked, repeated and abrupt weeping spells and trembling of right arm and leg, absent mindedness, impaired consciousness and disturbed sleep was admitted to psychiatric inpatient care. Along with relevant pharmacotherapeutic agents, he was subjected to a session of abreaction therapy, wherein he was made to engage in a free association of painful and disturbing personal details of his past romantic affairs, about which he was very guarded when in conscious state during previous therapy sessions. Suggestions were made during abreaction, about how he was gradually healing and becoming a wholesome, healthy person again. Patient responded favorably and his symptoms alleviated drastically over the next 2-3 days, which continued to reduce gradually.

**Keywords:**

Dissociative disorder, abreaction, catharsis, conversion disorder.

**INTRODUCTION:**

The essential feature of the Dissociative or Conversion Disorders is a disruption in the usually integrated functions of consciousness, memory, identity, or perception. The disturbance may be sudden or gradual, transient or chronic. The common dissociative disorders in the Indian setting have been reported to be conversion disorders, atypical dissociative disorders and possession syndromes.<sup>1, 2</sup>. Especially in the Indian setting, females are more affected than males. Female preponderance has been noted in various studies.<sup>2, 3</sup>. Hypnosis is often successfully used as a therapeutic tool to alleviate dissociative symptoms. Hypnotic intervention can be used to contain, modulate, and titrate the intensity of symptoms; to

facilitate controlled recall of dissociated memories, to provide support and ego strengthening for the patient; and, finally, to promote working through and integration of dissociated material<sup>4</sup>. Amobarbital interview may be useful to gain information about early or hidden conflicts and may facilitate integration of this information by the patient under skilled therapeutic supervision<sup>5</sup>.

## **HISTORY:**

The patient was an unmarried 28 year old male with 8<sup>th</sup> grade education, belonging to lower socioeconomic status from rural Nayagarh, Odisha. He was a driver by profession but was unemployed at the time of admission. He was born out of a non-consanguineous marriage and youngest among three brothers. He came with chief complaints of apparently unprovoked, repeated and abrupt spells of weeping and trembling of right arm and leg, absent mindedness, impaired consciousness and disturbed sleep for a period of 4 years. The first episode precipitated shortly after the intake of bhang at a temple. Symptoms continued episodically subsequently. Current episode began a month back. The symptoms followed an insidious onset and a fluctuating course and deteriorating progress.

Patient's premorbid personality was described as competitive and attention seeking. He always strived to be the best and did not take failure well. Informants mentioned a prior failed romantic relationship, which left a deep impact on the patient.

Patient had a history of using alcohol, tobacco occasionally for about 5 years for recreational and social reasons, but did not report any dependence. He was abstaining from use of alcohol and tobacco at the time of the examination. No history of abusive/assaultive behavior or obsessive compulsive symptoms. There was family history of unspecified psychiatric disorder in patient's elder brother in the past. The patient's provisional diagnosis was kept as catatonic stupor with a differential diagnosis of dissociative disorder.

## **MSE:**

The patient was cordial, cooperative but remained withdrawn and guarded. Rapport could not be fully established. There was motor retardation and speech was decreased in terms of volume and loudness. He was oriented to time, place and person with an intact memory and had a depressed affect. However, there were few transient periods of irrelevant and incoherent speech and inappropriate laughing and statements suggestive of increased self-esteem and elated affect. But he seemed to quickly return to his previous state of mind every time. He remained vague and elusive when asked about his emotional problems and kept changing his account every time the questions were repeated, appearing like conscious intent to confuse the interviewer. He briefly mentioned about a romantic relationship which appeared to be the cause of stress

for him. But he did not clarify details when asked.

### **PSYCHOLOGICALEVALUATION:**

Rorschach was administered on the patient as he did not seem amenable for objective testing. Behavioural observation revealed instances of seemingly irrelevant and incoherent speech during the enquiry and association phase. Speech volume and rate would also increase at times. The patient offered 40 responses spontaneously suggesting increased cognitive productivity. He gave a few idiosyncratic responses. A regressive thinking style was found to be amongst the positive findings, though not amounting to florid psychosis. Findings also point to poor integration of the stimulus field, perceptual errors or bias. High *animal* (A) responses indicate a stereotypical manner of approaching his environment. High *Form Dimension* (FD) responses may suggest affective difficulties and feelings of inferiority. High *Food* (Fd) responses may mean excessive dependence on others for help and guidance. He seems likely to be experiencing difficulties taking independent decisions. He is probably naïve in his expectations from others. Low amount of *Popular* (P) responses suggest occasions of transient loss of contact with reality. A high number of *Space* (S) responses are likely associated with negativism, difficulty in handling anger, oppositional tendencies and a potential for acting out behaviour. High proportion of *Whole* (W) responses coupled

with vagueness seen in the association phase point to likely free floating anxiety. ??? As per which manual of Rorschach interpretation.

### **PHARMACOTHERAPY**

Keeping above findings in consideration he was started with Escitalopram-10mg OD and Lorazepam 2mg thrice daily, then lorazepam was reduced and gradually stopped over two weeks duration.

### **PSYCHOTHERAPY :**

Catharsis was encouraged using free association. His family members were instructed not to reinforce his dissociative spells by being overly attentive.

### **Abreaction :**

Abreaction therapy has been historically used to treat some types of dissociative disorders by clinicians. A naturalistic study of patients with Dissociative Disorders states that the use of abreaction and nature of therapist characteristics were significantly positively related to restored hope and self-esteem. It also suggests that use of abreactions in therapy was positively associated with reduced alcohol and drug use, along with reduced trauma and flashbacks resulting in less need for the patient to drink and use drugs to avoid painful feelings.<sup>6</sup>

The patient was subjected to abreaction therapy. Under the influence of Pentothal he was encouraged to express himself. Initially he resisted and maintained

that nothing was wrong, but with increased relaxation, he spoke of his painful experiences of his prior relationships with his former employer and a failed romantic relationship. He stated about how he felt like a failure. Catharsis was facilitated by gentle questioning, verbal acceptance and validation of his emotions. In the later phase, suggestions were given with ideas of healing and recovery. The session lasted for about 2 hours.

### CONCLUSION:

Conversion disorders tend to be more common in females, presenting rarely in males. Men are expected to be “independent, masterful, assertive, and instrumentally competent” and to “repress emotions that might be associated with vulnerability”.<sup>7,8</sup>

Jones noted that considering the viewpoint of learning theory (i.e., reinforcement for appropriate behavior), psychoanalysis (i.e., primary and secondary gains), and sociological theory (i.e., culturally appropriate role models), “it is likely that the usefulness of conversion symptoms is greater for women, generally, than for men”.<sup>9</sup> The patient paid multiple visits to many physicians in 4 years before coming to psychiatry. The patient showed a significant decrease in the frequency and intensity of symptoms. His social interaction, insight and judgment improved. Along with medication, abreaction therapy proved beneficial in this case, thus garnering further support for its usefulness in similar cases.

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