Creativity in Pathology

On Dissociation and Questions of Self-Existence

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Introduction

Adolescent Psychiatry

λ Eating Disorders (Bulimia Nervosa, Anorexia Nervosa)
 λ Borderline Personality Disorder
 λ Social Withdrawalect.

- λ Young patients not only suffer from the disorder, but also try to live in their own way in this distress.
- withdrawal = measure to protect themselves
- over eat = outlet to relieve stress
- λ Their attitude of living creatively is expressed as symptoms of psychiatric disorders.

Creativity and Dissociation

 入 Dissociative Disorders
 ¬ Having been increasingly diagnosed mainly in the young in recent years
 ¬ Attracting considerable attention in not only the psychiatric field but also in society in general

λ There is a particularly important association between the phenomenon "dissociation" and creative activity.

About Dissociation

What is Dissociative Disorders?

Dissociation

- λ Various mental and physical disorders
- Loss of memory during certain time periods in the past
- Loss of consciousness with convulsion
- Behavior controlled by alternating personality states
- Paralysis of the four extremeties

λ "the condition in which personality integration is difficult"

Diagnosis of Dissociative Disorder

λ ICD-10 (World Health Organization; WHO)

- "A partial or complete loss of the normal integration between memories of the past (=amnesia), awareness of identity (=blurred sense of self) and immediate sensations (=paralysis of sensation), and control of bodily movements (=paralysis of movement)"
- = "the condition in which personality integration is difficult"
- λ DSM- \overline{W} (American Psychiatric Association)
- Only mental symptoms
- Physical symptoms = Conversion disorder

λ Dissociative disorder \leftarrow Hysteria

History of Hysteria (1)

λ 20th century B.C. ancient Egypt Many diseases observed in females were considered to be due to the "upward movement of the uterus".

= Uterus Suffocation Theory
 ☆hysteria ← hystera (= uterus)

λ 4th century B.C. Hippocrates
 "A disease inducing respiratory arrest, loss of consciousness, coma"
 = females' disease due to uterine movement in the body

History of Hysteria (2)

 λ Middle ages (5th ~ 14th century) Physical symptoms of hysteria (anesthesia, paralysis, contracture) = "Stigma" signs of possession by the devil \rightarrow many patients with hysteria have been victims of witch hunts

- λ 18th century (France) Mesmar
- Diseases are cured by improving the balance of "animal magnetism" in the body.
- Inducing personality alteration by changing animal magnetism
- disorder

 λ The end of 18th century Cases of multiple personality

History of Hysteria (3)

- λ The end of the 19th ~ the beginning of the 20th century Various attempts to establish theories about hysteria
- Charcot: dealing with hysteria as a theme in medicine
- Janet: "dissociation", multiple personality states
- Freud: psychoanalysis, inferring the existence of "unconsciousness"
- Kretschmer: hysteria = thanatosis as animal behavior
- λ 1930s ~ 1970s studies on hysteria declining
- Suspicions: not a real disease, histrionic, malingering
- Psychiatrists' attention being directed from hysteria to schizophrenia

History of Hysteria (4)

- λ 1970s Hysteria attracting attention in the U.S.
- Hysteria in many soldiers returning from the Vietnam War
- Hysteria in survivors of child abuse
 - * "Hysteria" \rightarrow "Dissociative Disorder"
- λ 1980s ~ Multiple personality disorder
- Different from hysteria
- Association with actual "psychiatric trauma"
- Multiple personality disorder as the severest form of dissociative disorder
- λ At present revision regarding the 3 points

Various Dissociative Disorders

Dissociative Amnesia Dissociative Fugue ...physical flight to far places without knowing it Dissociative Identity Disorder ...multiple personality Dissociative Stupor ...psychogenic loss of voluntary movement and responses Depersonalization ...loss of the sense of personal identity and reality Trance, Possession

Dissociative Convulsion Dissociative disorders of movement Dissociative disorders of sensation

Two-Sidedness of Dissociation

Case 1. classical hysteria, female

λ She frequently had attacks of hyperventilation from her school days, and began to often develop attacks of generalized convulsion when she was 25 years old.

λ She began to visit a psychiatric clinic when she was 27 years old. However, in the consultation room, generalized convulsion or backward arching of the body ("opisthotonus"). Even when her worried parents visited her, she refused to meet them, but the reason was unclear even to her.

Case 1. (continued)

λ At the age of 28 years, she often became excited, saying, "Someone enters my head." or "Another me appears.", which suggested personality alteration.

λ She was excited during generalized convulsion or personality alteration. However, after the attack, she looked as if nothing had happened.

λ I dealt with her consistently in a supportive manner and promoted realistic improvement in the living environment, and her condition gradually improved.

Case 2. Amnesia of personal history, male

- Patients forget all about their past and have no idea of who they are
- Not so many cases have been reported in Western countries. However, in Japan, many cases have been reported.
- "general amnesia" "Zenseikatsushi-Kenbou"

None day, a man was found lying in a station of the Shinkansen service, with no information regarding his name or address. He began to live with a temporary name and age (30 years) given by the police.

Case 2. (continued)

After 3 years, he heard the "voice of God" as an auditory hallucination, and rode on a bicycle for about 100 km, according to the instructions of the voice, fell, and was found lying on the ground. He then began to visit the psychiatric department.

A He sometimes suddenly wished to die and set fire to his house in a vacant state of mind, and was consequently hospitalized for some months. In addition, he often desired treatment on an inpatient basis due to confused thoughts.

Case 2. (continued)

> Further, he often lost any memory of several hours, in which he appeared to have performed strange acts because a large sum of money was lost, here were bruises over his entire body, or electrical appliances not belonging to him were present in his room.

λ His memory of the past did not return. However, occupational training was performed to promote adaptation to society, and his psychological state gradually stabilized.

Comparison between "normal state" and "unstable state" on Case 2.

	symptoms	emotion	interest
Normal state	Amnesia of personal history	Indifferent to others Aloof from the world	Realistic Materialistic
Unstable state	Amnesia of personal history Setting fire Becoming confused Losing money Hallucination	Being confused Crying out for help	Voice of God Charmed by fire

Classification of dissociative symptoms

λ "Psychoform dissociation" ...psychological dissociation
 λ "Somatoform dissociation" ...physical dissociation
 = in normal state

 λ "Promitive psychosomatic reactions" abstract state of mind, agitation attacks, loss of consciousness, generalized convulsion, opisthotonus
 = in unstable state

Dissociation feelings

λ Poor verbal expressions in the normal state
 λ Indifferent to symptoms in their unstable state
 λ Having a negligible interest in matters around them

 λ A false impression of their verbalization

 λ Not being able to establish trusting relationships with them, always having feelings of futility

= "dissociation feelings"

- Difficulty in emotional communication in patients
- Feeling of detachment from their surrounding world

Another Self

Case 3. dissociative identity disorder (multiple personality disorder), female

- λ Her father had always been violent toward her mother since her early childhood. Her parents divorced when she was 14 years old, and she began to live with her mother. Subsequently, she began to refuse to go to school.
- λ From the age of 17 years, she showed symptoms such as transient amnesia, personality alteration, and wristcutting.

λ When she was 18 years old, she visited the psychiatric department due to having 23 personality states. Among these personality states, 2-3 were impulsive and aggressive, causing repeated self-injuries, attempted suicides, and violent acts against her mother.

Case 3. (continued)

- λ Each of these personality states is considered to have developed due to a specific traumatic experience during early childhood such as observing her father's violence toward her mother or being left alone at home.
- λ These personality states were given fantastic names such as those of characters in animations, and their personality traits were very individual. The personalities included a very positive-thinking good youth, shy and withdrawn girl, and an aggressive destructive infant.
- λ Her personality alteration slowly decreased while she gradually organized her feelings toward her parents, and a feeling of calmness returned to her.

Two-Sidedness of dissociative identity disorder

- λ When multiple personality states are present, two-sidedness is inconspicuous.
- Calm personality states ... normal state
- Violent aggressive states ... unstable state

λ In multiple personality disorder (dissociative identity disorder), the appearance of various personality states can prevent patients from developing the very painful unstable state.

Two-sidedness of dissociation (summary)

 λ Normal dispassionate state

- Dissociation feeling (futile feeling because of communication with them)
- Feeling of detachment from the surrounding world
- λ Unstable state characterized by markedly confused thoughts
- Primitive psychosomatic reactions (generalized convulsions, loss of consciousness)
- hysteria

Traumatic dissociation (van der Hart)

 Dissociative disorder is closely associated with a history of traumatic experience.

λ "Emotional part of the personality (EP)"
 …Remembering traumatic experience
 λ "Apparently normal part of the personality (ANP)"
 …Absorbed in daily life

 Various complicated dissociative symptoms develop from these two parts.

Development of dissociative symptoms

Unstable state

(hysteria)

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Normal state

Dissociative symptoms (personality alteration, hallucination, amnesia)

Avoidance of unstable state

=<process of imagination
 or creativity>

Question about Self-Existence

Meanings of dissociative symptoms

λ Psychoform dissociative symptoms

 (e.g., personality alteration, hallucination, amnesia)
 = "Loss of the self-belonging of experience"

 λ Somatoform dissociative symptoms

 (e.g., absence of body movement, sensory paralysis, ...)
 = "Functional loss of the body as an experience medium"
 λ Primitive psychosomatic reactions (e.g., generalized convulsion)
 = "Confusion of the place of experience"

... "Loss of the subjectivity in experiencing the world"

cf. psychosis (e.g., schizophrenia)

"Heimat"

- Case 1 : refusal to see family members, leaving home and living alone
- Case 2 : amnesia of family members = the most extreme avoidance of family members and the hometown
- Dissociation feelings: refusal to emotionally communicate with family members and others
- λ "Heimat" = hometown, descent, parents, family, emotional communication with others
 Functioning in the background of all experiences
- λ Dissociative disorder is a disease characterized by a repeated wish for and refusal of "Heimat"

Questions about self-existence

λ Heimat: places, persons, situations that unconditionally accept and guarantee the existence of the person
 = a factor as a basis of the self

 λ Dissociative disorder = loss of subjectivity
 = Asking the meaning of self-existence by approaches to (unstable state) and estrangements from (normal state) Heimat

λ Dissociative symptoms = formed by a *creative process* in response to the question about the meaning of selfexistence

Creativity and Dissociation

Creative process (1) (R. Gordon)

λ 1. Preparatory stage

- People face problems, are absorbed in them, and make all efforts to solve them.
- Conscious self, knowledge, skills

λ 2. Confinement stage

- Everything is jumbled and pending
- Give up trying to solve the problem
- Doubt, suffer, worry, despair
- Seeds of creativity "creative emptiness"

Creative process (2)

λ 3. Inspiration or revelation stage

- Suddenly, a certain idea occurs to them.
- Feeling God's grace

λ 4. Verification state

 Various concepts received by inspiration were examined, organized, and given appropriate expressions.

 Creativity = "the ability to use ego function while abandoning it"

Creative process and development of dissociation

- λ Creative process (Gordon)
- ¬ Facing a problem → distressed in solving it → separated from reality → creating a new reality
- λ Development of dissociative symptoms
- ¬ Apparently adaptive living (normal state) → facing a problem (unexpected situation that can induce dissociation) → entering a state of ecstasy ("Heimat")

Dissociation as creatures' adaptive responses

- λ Humans live, adapting to their environments in the normal state.
- λ At every moment, humans live, referring to the previous reality and predicting the next one.
- λ If unpredictable situations occur, humans develop a confused state.
- λ However, after a certain time, they live as if nothing had happened.

= Biphasic nature of dissociation

"Healthy dissociation"

λ Humans create a new "reality" using their imagination to avoid the question of selfexistence.

 λ In the crisis of self-existence, people are placed in a chaotic situation and enter an imaginary world = creative activities

λ Creative activities = "*healthy dissociation*"