

20.02.2021

Sem II (1)  
Psychopathology

Psychosis

Q. Discuss the symptoms and etiology of paranoia. Or what is paranoia how does it differ from paranoid type of schizophrenia. Or Discuss the clinical pictures & dynamics of paranoid reaction.

Ans. (1) The term paranoia was used by the ancient Greeks & the Romans to denote any mental disorder. (Kraepelin used this term to denote delusions & impaired contact with reality.) (Hippocrates used the term to denote insanity.)

(2) However in recent time paranoia is used to denote a condition in which the mental faculties appear to remain in fact, though at the same time the person is characterised by a highly organized delusional system.

Today paranoia is indicated by paranoid reaction or paranoid psychoses. Symptoms (Clinical Picture) - Paranoia or paranoid reaction is a psychotic disorder. However this disorder is different from other psychotic disorders such as schizophrenia & manic-depressive psychoses. (The paranoid reaction is really a peculiar psychotic disorder. The reason is that the patient appears quite normal in conversation, emotional responsiveness & actions with only one symptom that he suffers from highly organized delusional system. Delusional system is highly organized delusions.)

(3) Paranoia is a psychotic disorder which differs from other psychoses like schizophrenia & manic-depressive psychoses. It is really a peculiar psychotic disorder where patient appears to be quite normal in conversation, emotional responsiveness & actions except that he suffers from highly organized delusions.

- ③ organized delusions are also found in paranoid type Schizo.
- ④ However Paranoid type Schizo. also observed in schizophrenia called paranoid type Schizo. However there is a clear difference between Paranoia proper & Paranoid type Schizophrenia. We shall discuss here the symptoms of paranoid reaction. & shall see how it is diff. from paranoid type Schizo. & schizophrenic reaction.
- ⑤ Fall are among main symptoms of paranoia and we can still see how it is diff. from paranoid type Schizo.

Here 1) the patient

- ① Persecution
- ② relatives & friends enemies
- ③ family members
- ④ jealousy of him & planning to murder him
- ⑤ He can convince others about his delusion.

Persecutory Delusions - 1 (The most striking symptom of paranoid reaction is persecutory delusion. The patient develops ideas of persecution. These ideas are commonly related to the patient's relatives or friends. The patient may develop persecutory delusion that his family members are jealous of him & they are planning conspiracy against him. If the patient finds a group of people sitting & talking, he soon concludes that they are planning for his murder. The patient is so convinced of his delusion that he can convince others of the same.

It should be noted that delusions of paranoid type differ from those of Schizo. In paranoid type delusions are systematized & organized where as in paranoid Schizo delusions are generalised & unsystematized.

Suspicion - [It should be noted here that the delusional system of paranoid proper differs from that of paranoid type schizophrenia. In Paranoid proper the patient's delusions are highly organized & systematized where as in paranoid type schizophrenia the patient's delusions are more generalised & un-

Paranoia proper delusions are independent of hallucination where as in

Paranoid delusions are systematized. Similarly in Paranoid reaction delusional system is usually independent of hallucinations whereas in Schizo. delusions are generally accompanied by hallucinations.

(3) In paranoia there is no complete cognitive disorder whereas in Schi. there is complete cognitive disorder. Moreover in Paranoia proper the delusional system is not the indicative of complete cognitive disorder whereas in Schizo. the delusional system along with hallucination is the indicative of complete cognitive disorders.

Here in grandeur delusions - The paranoid patient considers himself to be the most superior person on the earth. He considers himself to be the great inventor or a political leader on the earth. He has delusions that his friends & relatives are jealous of his unique ability and superiority & they desire to persecute him. But such ideas are not found in paranoid type schizophrenia. Some patients consider themselves superior to everyone else of the earth. The patient may consider himself to be a great inventor or a great scientist or political leader on the earth. He thinks that his relatives & friends are jealous of his unique ability & superiority & hence they desire to persecute him. [It should be noted again that such exalted ideas are usually not found in the paranoid type Schizo]

(3) Religious Delusions - Some patients suffer from delusions related to religion. The patient may consider himself to be the messenger of god to save the world from disaster. The patient may visualize god & may hear message from him. However the patient does not like to reveal the messenger to save the world from disaster. most of us find in preaching but never discloses his talk with the god.

He spend most of the time in preaching Coleman says He preaches only to make those followers of his new

Contents of talks between him & God. may remind the people of threats of fire burning hell & similar persuasive devices. Coleman says "Religious Paranoiacs may consider themselves appointed by God to save the world & may spend most of their time preaching in Crusading to gain adherents to their new cult."

\* Litigious Delusions - Some paranoiac patients suffer from litigious or erotic delusions. (It should be again noted that such religious delusions are usually not found in schizophrenic patients.)

4) Erotic Delusions: - Some paranoiac patients suffer from Litigious or erotic delusions. The patient may consider herself or himself the most handsome creature on the earth; the patient may be victim to such delusion as that some beautiful male or female has fallen in love with him or her. The patient may write letters to the imaginary male or female & when he does not get any reply, he concludes that it is all because of his family members or friends. at times such patients go to the legal court in persistence with their erotic delusions. It should be noted here also that such litigious or erotic delusions are not necessarily found in the schizophrenic patient.

Such erotic delusions are not found in schizophrenic patients

some patient suffers from <sup>delusional</sup> religious delusion  
religious - the study (5) this type of patient spends most of his time in court.  
the patient has delusion that his friends & relatives are against him  
& one might see the patient so when goes to legal court file cases  
against them. He fight cases throughout his life.

type of patient  
Suffer from severe suspicion - The paranoid patients also  
suspicions & doubts of various kinds. However such suspicions  
are more common among the people of  
close relations. If the wife of a paranoid  
husband wants to know the time of his  
return from his office, the husband  
soon concludes that his wife is unfaithful & wants to commit sexual relations  
with some other persons in his absence.

Similarly if a paranoid wife finds her  
husband smiling at an innocent girl,  
she concludes that there is something wrong  
between her husband & the girl. <sup>Milner</sup>  
Milner (1949) has sighted a paranoid male  
patient who developed suspicion that  
his wife suffered from dangerous disease  
& purposely had infected him because  
she wished him to die. The result was  
that the person murdered his wife by  
battering her with a hammer because  
of his strong delusion against her.

It should be again mentioned here  
that this symptom is not commonly  
found in a schizophrenic patient.  
It is obvious that the paranoid  
patient has several types of delusions  
which are necessarily diff. from the  
delusions observed in the paranoid  
type schizophrenia. Moreover emotional  
disorders, thought disorders, speech  
disorders are diff. from the delusions  
observed in paranoid type  
schizophrenia.

Thus we see  
that delusions  
of paranoid patients  
are diff. from the delusions  
observed in paranoid type  
schizophrenia.

hypocondriac  
paranoid  
The patient  
has fixed delusion  
that he has cancer  
& T. & B. or cancer  
& he is going to die  
soon. Not only  
can save him  
at any cost.  
He has specific  
prejudice against  
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disturbances & Cognitive disorders are not found in paranoid patients but they are the essential symptoms of schizophrenic reaction. [In paranoid reaction loss of intellectual efficiency is also not observed. So let us conclude in the words of Kisker "The classic symptom picture of the paranoid reaction is one in which there is no loss of intellectual efficiency & in which the person is quite capable of functioning adequately in all areas except those involving his or her delusional system"]

Etiology  
cause in left

### Etiology or Dynamics of Paranoia:-

Regarding the Dynamics of Paranoia or Paranoid reactions, Coleman 1975 has sighted the foll. etiological factors:-

- 1) Faulty learning & development:- Investigations have shown that faulty learning is a significant environmental factor leading to paranoid reaction. Sarvis (1962) & Schwartz (1963) found that authoritarian family background is a significant cause of this psychotic disorder. Similarly inadequate socialization of the child may lead to the dev. of Paranoid symptoms.
- 2) Failure & Inferiority:- Paranoid symptoms may develop as a result of failure in life situations such as social, occupational & marital. The person may have unrealistic goals & he may fail to achieve such un-

① Coleman was supported by all child of paranoia  
② Authoritarian family background  
③ Inadequate socialization  
Failure in life (social, occu, marital) cause

Rosen & Kiene 46  
found that  
failures  
to personality  
feelings lead  
to dev.  
symptoms.

realistic goals & thus he may project his failures to the other people. Rosen & Kiene (1946) found that the feelings of inferiority are masked behind paranoid symptoms. They found that failures & inferiority feelings in various situations make the person

Coleman's  
has remarked  
that failures  
lead to  
reactions.

hyper sensitive & this hyper sensitivity may lead to the dev. of paranoid symptoms. Coleman (1975) has remarked "the history of the paranoid is replete with failures in critical life situations..."

3) Elaboration of defences & The pseudocommunity

The patient  
puts on  
many defences  
which are based  
on his fail-  
ures in life  
other words  
he tries to  
show superiority  
but fails  
because of others.  
He gives up  
for his failure.  
Here  
Pseudo  
community  
Schmid  
Cameron has  
called it  
pseudo  
community  
Coleman has  
also supported  
it.

unity :- Studies have shown that sometimes paranoid reactions develop as a result of the elaboration of defences. This elaboration of defensive structure is based on his failures. The patient adopts his defensive structure just to avoid self devaluation & Self Condemnation. (In this connection it should be noted that projective defence is the most common defence adopted by the patient.) Cameron has referred to this process as pseudo community. Here the patient organizes the people around him mostly on imaginary basis. The patient develops a bunch of persecutory delusions as a result of projective defence structure. (Coleman has also remarked "paranoid reactions usually develop gradually, with mounting failures forcing the indiv. to an elaboration of

his defensive struc."

4) Sexual Maladjustment :- Paranoid reaction may also develop as a result of sexual mal adjustment. Rosen & Kiene (1946) claimed that normal heterosexual dev. may also lead to the dev. of paranoid reaction. But in one of their studies it was found that the paranoid patient suffered from sexual frigidity. So it may be a fact that sexual maladjust. pre-

Acc. to Rosen & Kiene 1946  
maladjustment  
in normal  
heterosexual  
sexual frigidity  
paraphilia  
keating  
generalized  
sexual frigidity.

Acc. to  
The psychoanal.  
includes  
Heterosexual  
tendency  
to  
persecutory  
delusions  
anal fixation  
lead to homosexual  
conflict  
results in  
paranoid  
symptoms.

disposes the dev. of paranoid reaction.  
Homosexual Conflicts :- The psychoanalysts including Freud have emphasised the role of homosexual conflicts in the dev. of persecutory delusions. Cameron (1959) has presented an extensive study of anal fixation leading to homosexual tendency & ultimately to the dev. of paranoid delusional systems. He stated that the patient's ego is not

ready to recognize homosexual tendency & so this tendency is projected to other people in the form of delusional systems. For e.g. A person's accusation of unfaithfulness against his wife may be a projective defence against his own homosexual tendency. (Coleman has observed "homosexual conflicts have frequently been emphasised in the origin of paranoid delusional systems.")

5) Sociological factors :- Recent studies

50 Social stress leads to paranoid symptoms (9)

usually in later part of life usually between 45-55 especially if economically physically he depends upon others which is a cause for his paranoid symptoms

have shown that paranoid reaction may develop as a result of social stress.

Usually Paranoid reaction develops in the later part of a person's life. More particularly it develops usually between 45 to 55 yrs. of age. This duration of age is generally a retired age. The person is devoid of sources of income. He suffers from motor insufficiency & he is largely dependent upon other members of the family. Naturally he suffers from social stresses which are prone to paranoid symptoms.

(Kisler has reported that the old people who are forced to live outside their family are more prone to this mental disorder than those who are allowed to live within the family.)

Thus it is concluded that paranoid reaction may develop as a result of several etiological factors as mentioned above.

Kisler - The old people who are forced to live outside their family are more prone to this mental disorder than those who are allowed to live within the family