

Culture Bound Syndrome - An Unprecedented Inclusion

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ABSTRACT

Delivery of mental health services to a large population is really a challenging task especially country like India. Many people agree that culture, beliefs and norms of society put forth a stabilizing, positive influence on mental health, however individual expectations vary from acceptable social norms. It is not uncommon to find culture bound syndromes within primary care in India and other Asian countries. Nevertheless, the understanding of culture bound syndromes among mental health professionals is scarce. Therefore, this review will give a clear picture about the common culture bound syndromes in South East Asia in particular India.

Key words: culture bound syndrome, mental health.

INTRODUCTION

Culture is the way of life and social behaviour of a particular group of people which is the deposit of knowledge, experience, beliefs, values, attitudes, meanings, hierarchies, religion, roles and concepts that are possessed and acquired by a group of people. ⁽¹⁾

The word “syndrome” implies specific disease entities and the term “bound” implies that the entities described are restricted to a single culture. Collectively the culture bound syndromes are the illnesses that are present only within a specific group of people.

The term culture bound syndrome was intended not only to describe specific syndromes, but also meanings of illness and the cultural notions of disease causation. The study of culture bound syndrome emphasis on the necessity of considering not only the physiology, but also culturally significant beliefs, practices and the

individual’s social situation in providing treatment.

What is culture bound syndrome?

Culture-bound syndrome is also called culture-specific syndrome in the patient is presented with combination of psychiatric and somatic symptoms which are prevalent only within a specific society or culture. There is no evident of any biochemical or structural alterations of body organs or functions. Moreover, the disease is not recognized in other culture. ⁽²⁾

Is culture bound syndrome, a psychiatric illness?

The term culture-bound syndrome was included in the fourth version of the Diagnostic and Statistical Manual of Mental disorders (American Psychiatric Association, 1994). Culture-bound syndrome denotes recurrent, locality-specific patterns of aberrant behaviour and troubling experience that may or may not be linked to a particular DSM-IV diagnostic category. Many of these patterns of

symptoms are considered to be illnesses and they also have their own local names in the community.⁽³⁾

How culture has an impact on mental health?

Culture plays a vital role in determining the psychiatric disorders. The attitudes towards the mental illness vary from person to person. The cultural and religious teachings always have an influence on the beliefs and attitude of an individual towards the origins and the nature of mental illness. However, some psychiatric syndromes are limited to certain specific cultures and hence those disorders are called as the culture bound syndrome.

Culture-bound syndromes are the folk illnesses in which there are the alterations of behaviour and experience figure prominently. Actually many of these are not syndromes at all but they are local ways of explaining some wide assortment of misfortunes.⁽⁴⁾

The common culture bound syndromes are Dhat Syndrome, Possession Syndrome, Koro, Gilhari syndrome etc.

What are the cultural variations in response to Dhat syndrome?

“Dhat Syndrome (rog)” is not something new to the culture, which has recently come up. It is a very old term which was described by Dr.N.N. Wig in the year 1960. This syndrome is recognized both by the people as well as the medical practitioners in the society. In china it is known in the name of “shenkui”

Dhat is a Sanskrit word which means ‘Dhatu’- semen. Some of the related terms to this, are ‘Veerya’ which is also known as bravery, strength, courage and valour. It is also believed that 40 meals make 1 drop of blood, 40 drops of blood make 1 drop of bone marrow and 40 drops of bone marrow makes 1 drop of semen and hence it is considered as “a precious fluid”. People believe that, the preservation of Dhatu leads to healthy and long life whereas the loss of semen is very harmful to health. Hence the life preserving properties of semen is deeply ingrained in Indian culture.^(5,6)

The person with Dhat syndrome usually has a varied somatic, psychological and sexual symptom. Person complaints of passing of whitish discharge in urine and he also report of premature ejaculation or impotence. The other symptoms include, weakness, aches, anorexia, feelings of guilt and panic attacks.^(7,8) Initially it was thought that this syndrome is prevalent only among men, but later it was found in women too.

Treatment mainly consists of alleviating the misconception about the illness through psychoeducation, reassurance and treating the underlying psychiatric disorder by the use of anti-anxiety and anti-depressant drugs. It is also suggested that, emphatic listening, a non-confrontational approach along with the use of placebo is also helpful. Many studies have proven that the management of Dhat syndrome involves sex education, relaxation therapy and medications.^(9,10)

Is the Possession syndrome has publicly recognized as apparently superhuman feats of strength?

A person who is often having a horrible impulse to do something bad, the emotions that cannot be controlled and it also seems to be not of their own, exhibits the symptoms that the person is possessed by a demon, for the eyes of the public.^(11,12)

Many religious shrines hold special annual festivals where hundreds of people get possessed simultaneously. These people are looked as a special by their family members and villages which itself reinforce the secondary gains. The individual, who is possessed by a ‘spirit/soul’ of deceased relative or a local deity, speaks in changed tone.⁽¹³⁾

The medical practitioners explain that, the person who has an uncharacteristic mood and demonstrates the destructive behaviour is suffering with **Possession Syndrome** which is included in ICD-10 under Dissociative disorders. It is seen in all parts of India usually in rural areas or in migrants from rural areas. The most important thing about this syndrome is that, the individual is often getting relief from

their symptoms when an exorcism has been performed on them. Majority of these patients are females as they don't have any outlet to express their emotions. ⁽¹¹⁾

It is very important to explore the precipitating factors of the underlying stress which caused the possession attack. Treatment is also aimed to decrease any secondary gains that the patient may be getting from this behaviour. Antidepressants and anxiolytics are helpful in certain cases. ⁽¹³⁾

Is "Koro" - an overpowering belief of the individual in the community?

Koro is a culture-specific syndrome which is also known as **shrinking penis** in which the individual has a strong belief that one's genitalia are retracting and will disappear but there are no any true longstanding changes to the genitals.

Koro is described as a syndrome in ICD-10 and DSM-IV. In DSM-IV-TR, koro is listed as one of the entries in the Glossary of Culture-Bound Syndromes of Appendix I. The manual gives koro's definition as "a term, probably of Malaysian origin, that refers to an episode of sudden and intense anxiety that the penis (or, in females, the vulva and nipples) will recede into the body". ⁽³⁾

The medical practitioners explain, that the Koro is the false belief of an individual that the genitalia is retracting into abdomen which will ultimately lead to death. This syndrome is seen in both the sexes. The individual, who is suffering with this syndrome, is mostly seen that they involve in abnormal practices of applying external retractors to the genitalia in form of clamps, chains etc. to avoid it retracting back. ⁽¹⁴⁾

The syndrome occurs worldwide, and mass hysteria of genital-shrinkage anxiety has a history in Africa, Asia and Europe. It is seen in North-eastern states like Assam which may occur as epidemics. In the United States and Europe, the syndrome is commonly known as **genital retraction syndrome**. ^(15,16)

The condition can be diagnosed through psychological assessment along with physical examination to rule out the genuine cause that causing true retraction. Treatment is mainly focussed on the reassurance of the patient and talks on sexual anatomy. Psychotherapy is found to be more useful in these patients.

In china, traditional treatment is given to the individual suffering with this syndrome. Praying to gods, performing exorcism, beating the person if a fox spirit is believed to be involved. Some are treated with herbs, pepper and ginger soup, liquor, stag of deer or deer tail, tiger penis, deer penis, or fur seal penis. ⁽¹⁴⁾

An increase in the inner heat of the body attributes to culture bound syndrome?

Suddu is a culture specific syndrome. People in some culture believe that, increase in the inner heat of the body will result in pelvic heat and painful urination. It is very familiar in south India, especially prevalent among the people in Tamilnadu. It occurs in both males and females. ⁽⁴⁾

People believe that it is often caused by high temperature during summers, lack of healthy foods and fluids, long travel, improper sleep patterns etc., The individual presents with the complaints of severe lower abdominal pain, dark yellow coloured urine, painful and burning micturition, constipation, head ache, fatigue and dry mouth.

Medical persons explain suddu, simply as "dehydration" which can be corrected by the intake of adequate fluids like fresh juice and butter milk along with fibre rich diets. The symptoms are usually treated by applying sesame or castor oil in the umbilicus or on the head to reduce the body temperature. Few people get relief from having oil massage and warm water bath. Having Fenugreek seeds in empty stomach is found to be useful and also been suggested by many. ⁽²⁾

Is a lizard syndrome being a new culture bound syndrome?

Gilhari syndrome is also known as the “**squirrel or Lizard syndrome**” which is highly prevalent among the regions of west Rajasthan in India.

According to the individual, a small blood filled swelling on the body changing its position from time to time as if squirrel or lizard is climbing in the body from back and reaches the neck leading to obstruction of airways followed by death if it is not crushed. The person strongly believes that the condition is very serious and fatal. The treatment of this syndrome is usually sought from the local faith healers in the community. (12,17)

The medical practitioners explain that the Gilhari syndrome is nothing but the muscular contraction or movements of the specific group of muscles that is caused by the severe anxiety and stress in an individual. It affects mostly the young adults who are having the false cultural

beliefs of lizards and being under the more of physical, biological and mental stresses. The physical examination and investigations reveals no physical illness in the particular individual. They simply call these symptoms as tactile hallucinations with delusions. The patients can be categorized as having somatoform disorders associated with maladaptive behaviours. (18,16)

The treatment of this syndrome is mainly focused on reassuring the patient and providing supportive psychotherapy. Anti-anxiety drugs are found to be useful in reducing the symptoms in few patients. (3)

Are there new psychiatric illness found in folk cultures?

There is other few culture bound syndromes across the world on which light has to be thrown for the betterment of the mental health of the people. Some of the culture specific syndromes and its descriptions are as follows:

Table1. Different Categories of Culture Bound Syndrome with Description

<i>Nomenclature</i>	<i>Country</i>	<i>Description</i>
Culture Bound Suicide	India	Sati: It is the self-immolation by a widow on her husband’s pyre. It was seen mostly in upper castes notably Brahmins and Kshatriyas. Santhara/Sallekhana: It is voluntarily giving up life by fasting unto death over a period of time for religious reasons to attain God/ Moksha. It is commonly seen in Jain Community. (4)
Mass Hysteria	India	Mass hysteria is also known as collective hysteria, group hysteria, or collective obsessional behaviour where hundreds to thousands of people were seen to be believing and behaving in a manner in which ordinarily they will not. (4)
Hikikomori	Japan	most common among the adolescents who withdraw from social life, often seeking extreme degrees of isolation and confinement in their room, for prolonged periods, sometimes measured in years. (20)
Ataque De Nervios	Western Countries	The individual is presented with uncontrollable screaming or shouting, crying, trembling, sensations of heat rising in the chest and head, and verbal or physical aggression. It is usually associated with a stressful event. (20)
Brain Fag	West Africa	A person suffering from Brain Fag is usually a high school or university student with syndromes such as difficulties in concentrating, remembering, and thinking, as well as head, neck, and eye pain. It is caused by excessive external pressure to become successful among the peer groups. (20)
Amok	Malaysia	When a person suddenly withdraws from family and friends, then bursts into a murderous rage, attacking the people or objects around him with whatever weapon is available. (19)
Taijin Kyofusho	Japan	A person suffering from this syndrome is likely to be extremely embarrassed of themselves or displeasing to others when it comes to the functions of their bodies or appearances. This culture-bound syndrome is a social phobia dealing with social anxiety. (21)
Ghost Sickness	Native American Indian Tribes	A person suffering from Ghost Sickness is said to be preoccupied and/or consumed by the red or dying. It is sometimes associated with witchcraft and its symptoms include weakness, loss of appetite, nightmares and suffocation. (22)
Bhanmati Sorcery	South India	It is believed to be due to psychiatric illness i.e. conversion disorders, somatization disorders, anxiety disorder, dysthymia, schizophrenia etc. (4)
Jhin Jhinia	India	It is characterised by bizarre and seemingly involuntary contractions and spasms despite underlying pathology. (4)
Evil Eye	Mediterranean and Hispanic populations	The Evil Eye is a malevolent look which is believed to be able to cause injury or misfortune for the person at whom it is directed for reasons of envy or dislike. The term also refers to the power attributed to certain persons of inflicting injury or bad luck by such envious or ill-wishing look. The Evil Eye is usually given to others who remain unaware. (20)
Falling Out	Southern United States and Caribbean	Falling out is described as a constricted consciousness as a psychological response to anxiety and specific stressors. It is sometimes characterized by sudden collapse and preceded dizziness and spinning sensation. The person suffering from Falling Out can usually hear and understand why this is going on around them. (23)
Ascetic Syndrome		This syndrome, mostly appears in adolescents and young adults which is characterised by social withdrawal, severe sexual abstinence, practice of religious austerities, lack of concern with physical appearance and considerable loss of weight. (4)

CONCLUSION

Each individual's experience with the mental health and illness is unique. The growing ethnic and cultural diversity of the Indian population presents a challenge to the mental health field to develop an intelligent approach to mental health research and services. Therefore, understanding the individual and their cultural beliefs about mental illness is very important for the implementation of effective mental health care.

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