



Multiple Personality Disorder Syndrome?

What is man? It is difficult to define: is he a soul or psyche? One is spiritual, the other dynamic, or the combination of the two: the 'Aatma' and the 'Prana' (soul and life), as defined in the Rig-Veda- the most ancient Indian scripture.. 'Quran' also defines, that man is a subtlety! Made by God who also injected His Soul and intellect into him. According to 'Quran' Man is His assistant (Khalifa) sent to the earth for a purpose. The poet now wonders "Is God now ashamed for that?"

Psychic and psychical behavioral disorders have been known to mankind since prehistoric times. They were attributed to supernatural influences. Hippocrates was the first to deny this superstitious belief. Treating mental disorders is difficult since brain is a chemical computer. One brain is equal to all computers of the world. But how the brain stores memory is not yet understood. Freud added analyzing insights, while Hahnemann's homeopathy gave specific remedies.

"MULTIPLE PERSONALITY DISORDER SYNDROME":

Human psyche (not soul) is sick and gives rise to a group of mental symptoms with physical signs and behavioral disorders. Although exact nature or the pathogenesis is not yet clear, few theories described are:

- (i) As hysteria can be an emotional expression in the form of physical acts, personality disorder may be a somatic expression of its chemical content, expressed through various delusions, either visual or auditory, or may also be in the form of dreams.
- (ii) Some researchers linked this with auto immune disorder, where certain responsible enzymes being, release in certain substances in the body under the

influence of certain, psychological, emotional or phobic situations and which if not excreted out as the situation gets over, would damage own cells or centers and will alter their chemistry.

- (iii) Some pointed out serum toxin the Teraxin, an enzyme related due to disorder in protein or carbohydrate metabolism can be caused by trauma.
- (iv) Some even relate this to indigenous or exotic causes, occurring due to some dynamic influence? They hold the view that pineal body is (possibly) responsible for this! Pineal body is an endocrine gland, being discovered recently in relation to its functions, that this gland is a window to the x-zone? X-zone cannot be visualized through naked eyes.
- (v) Yet one more possibility: some researchers have described this as a disturbance in balance of the mind i.e. the to and fro movement such as e.g.; kill, don't kill; love, don't love. Now-a-days this is a common phenomena leading to stressful life.
- (vi) Few causes like withdrawal from reality with a tendency towards autism. Flat or uncongenial emotions, reactions with inconsistent and impulsive in nature. Split in personality or psychosis, due to withdrawal from social or emotional contacts. Disturbance in protein or carbohydrate metabolism by alcohol and drugs. Head injury or infection, may be hereditary.

Initial Symptoms:

Some characteristic features are, a decreasing interest in the outside world. Increasing interest in one's self with high ego, with own thoughts, own philosophy, loss of interest in work and social contacts. Odd behaviour, emotional reaction, anxiety, anger, weeping, cursing and banging own head: Sometimes violent and abusive, or inflict the injury on himself. Aversion with loved ones or family members. Impulsive and perception of auditory or visual hallucinations, sadness, indifference or violence towards loved ones or to himself.



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Often escapes from reality: walks fast, sleepless, crazy for music. Sudden changeability, from sadness to cheerfulness, from crying to laughter. Seeing oneself in mirror constantly or would show battered towards himself. May sit alone, staring out of the window for a long time. Day dreamer or sleep walker (somnambulism).

FEW EXAMPLES (BUT WHO WERE THE PATIENTS?):

Told by few colleagues; describing in their own words, "I was in general surgical unit, and was posted in a district hospital. It was around midnight when this happened. It was raining outside and I was about to sleep when some one knocked at the door, which was not unusual for me, most of the emergency used to come that way. The person who was standing was under umbrella, his face was not clearly visible. He started talking about the murder, whose body was brought to the hospital for the postmortem, sometime that evening. Suddenly lightening appeared for a while and I could see his hand in which he was holding the umbrella. There was a typical mark on it. Next day when I was conducting post-mortem, I found the same mark on the body. To my surprise the result of the postmortem was also same, as what he had described. Most surprising was I did not find that man thereafter in spite of my intense search."

Another interesting story described by an orthopedic surgeon, he said, "One girl, daughter of colleague in the same hospital, went to a picnic along with her classmates after finishing S.S.C. exam. After returning she started behaving strangely. She stopped eating and looked as if being possessed under some superhuman influence. Doctor at the hospital treated her, some other experts were also called, but her condition deteriorated. Someone suggested and a Moulvi (who teaches Quran) was called from a nearby village. He examined her and asked for a bottle. An empty saline bottle from the hospital waste was handed over to him. He examined her and explained to the relatives that he had locked that spirit which was influencing her into the bottle and handed that bottle to them with the instructions that it

must be buried under the ground away from there at some deserted place. But they buried it somewhere at the back of the hospital.

They noticed a psychological change in her behaviour, considering that psychologically. But the girl started getting attracted towards backyard as if some one calling her there and identified the spot where bottle was buried. Now doctors of the hospital decided to do an experiment. Secretly the number of the bottle was noted, and was buried inside the garbage of empty bottles were lying in a room at one side of the campus in a room, and which was only known to these doctors who decided to do that experiment.

To their surprise they found the girl started getting attracted towards that room, and finally unearthed that bottle from the heap of bottles. After this the bottle was buried as per the instructions of Maulvi, somewhere far away. And finally the girl was cured permanently."

Another interesting case, was narrated by a psychiatrist, as his most mysterious case. She was a lady around 30, during every no moon's night, used to get mysterious kind of attacks, as if she is being raped and her husband used to watch helplessly. Although husband did never see any person, but she did see, (in her delusions?)! So my friend decided to watch her, what happens and how happens On his anticipated day he fixed his appointment with the family, and in his own words... "I was chatting with husband in the drawing room, while children were sent to the neighbours house. As the anticipated time approached, husband started looking at his wrist watch desperately, in between somewhere around midnight she screamed, pointing towards window, he is there. I saw no one, except some noise, as if some one jumped. Husband started shivering, I saw she started posing as if was trying to protect her. But she was thrown on the cot, and then, like a film shooting! I don't understand, may be she would have been in hysterical fits, but what about he noises?" He further confessed "In fact I failed to treat her, a Sadhu succeeded"!!



CASE REPORT:

The patient (68 years old now) was a well known person and a friend. One evening, 5 years back) while returning from the office, I received a call from his daughter, that he has been admitted to a private hospital for head injury. When I reached the hospital, he had been shifted to some public hospital. I was told that he had a brain clot, and was shifted to neurosurgical emergency at K.E.M. hospital, Mumbai.

Next morning when I reached there I couldn't find him? I searched inside the medical emergency units but futile. Fortunately the Dean of the hospital (Dr. Ms. Nirmala Dixit) was my classmate. I took her help and could trace him. He was in the surgical unit. His daughter was standing with her cell phone to one side, his sons on the other, and he was lying on a cot of a general ward. I found him in a comfortable position with a drip on one hand and oxygen mask. His MRI report was showing subdural haematoma, but with no sign of compression.

He was first admitted in a neurosurgical unit only, but when neurosurgeon didn't find any clot, as diagnosed in private hospital, they shifted him to a neuro-physician.

From there he was shifted to medical emergency. But when they found the evidence of haemorrhage with history of trauma they referred him to the general surgical unit.

At surgical emergency, when they find high B.P. but no signs of compression or fracture skull, along with some neurotic behaviour, they referred the patient back to the medical unit. They called psychiatrist for their opinion and then sent back him to the surgical unit again. This is how patient was literally tossed from one place to other.

When I saw him he was looking comfortable, except for the unease of oxygen mask was fitted. He was trying to adjust that again and again as if was causing suffocation inside. From his other hand the saline drip was on, with blood stains at the site of injecting cannula. He was moving that hand too. I questioned to

myself. 'Is it painless, is his pathology also painless?' I observed he was talking non-stop, some sensible, some non-sense or abusing language! After seeing me he said 'hello', as if he recognized me. When I asked about his daughter he looked towards her, but didn't recognize his son. He included them with his enemies. In fact he also did not recognize me too but considered me as his friend. He pointed out other enemy towards a patient lying in opposite row, as his neighbour, and as if he is lying in his own house (not hospital). At times he was turning aggressive or arrogant and talking dirty words.

Patient was otherwise was very learned with multiple personality: a chain smoker with regular alcohol consumption, always busy in some or other work- writing or reading, or music riyaz. He was a poet, a singer and a writer with philosophical insight. A good prescriber and a busy doctor. Having an authoritative knowledge of jurisprudence in the field of religion. As a person reserved type, avoid crowd and society, but very friendly with intellectuals and artistic people.

History revealed, there was a marriage in relations, so family was busy; he preferred to remain at home. They didn't notice any much change in his behaviour, except he didn't smoke or consume alcohol on those days, rather were happy to see this change in him. No body new what else happened until when he fell from the cot and had bowel incontinence simultaneously. Then his mysterious behaviour and abnormal actions made them suspect, that some thing is wrong, so they took him to the hospital in the first place. By now he had started talking in some foreign language, not recognizing his wife thinking has been deceived.

Hyoscyamus – 30, 3 doses, 4 hourly were sent to him. (Analysing points: Indifference, complain does not; delusion, thinks he is at home, when not; memory mistakes and weak for persons. Abusive, and thinking wife is faithless, violent and involuntarily stools).

He became more violent after the second dose; which to me it was a good sign. But a young homoeopathic friend of his daughter, visited there & twisted my pre-



scription. She explained to them that I have given 'Pagalon Ki Dawa', (mad patient's remedy). The daughter made this an issue, I came to know this later, when they contacted my guru, Dr EGK Menon, on phone, who was at Kerala then.. He suggested *Glonoine, Arnica* and some other, I don't know as their attitude towards me was hostile. Whenever I visited the hospital they just ignored me. I could see the records of the treatment given because of my friend, the Dean of the hospital.

Treatment at K.E.M. Hospital: Conservative line of treatment, observation only. Reason, though massive subdural haematoma but no signs of compression were present. Haematoma was also typical, showing two different sets of hemorrhages indicating 'as if trauma has taken place on two different occasions, indicating patient had fallen more than one time. More interesting was, one set of haemorrhage was showing signs of resolving, Yet more interesting was psychic and behavioral symptoms were considered as post traumatic, for which no medicine was suggested. Only medicine was Depin, for controlling B.P. and vitamins. He started showing improvement constitutionally as well, and at the level of consciousness. But his daughter was not happy, since doctors were also not certain whether to do surgery or not. In fact that was the right way of treatment of such cases. However, after few days the patient has been shifted to Jaslok Hospital and I lost

track.

POST OPERATIVE COMPLICATION: At Jaslok he was immediately operated for tapping haematoma. Soon after the surgery patient lost his voice, and started deteriorating and was discharged in a critical condition, with a hope that he would improve gradually. Now patient was bed ridden and very weak and with no signs of recovery.

After hearing about this, I visited their house; his wife started crying, as he was in a hopeless condition, emaciated and speechless, lying on his bed. As he saw me, he burst out in tears, tried to talk with weak and muffled voice. I sat there for some time, observed the same kind of fiddling with nose to breathe in as if choking inside, in the same way what he was doing on the first day, at K.E.M. Hospital. I explained my observations and the detailed history to Dr. Menon when he came to Mumbai to see him. Two doses of *Alumina 30*, were suggested by him, and were given in 12 hours interval, symptom (1) Voice lost sudden, (after the surgery) (2) concomitant; suffocative feeling inside the nose, (according to Dr. Menon, *Alumina* has this characteristic).

Patient started improving gradually in all respect, now four years have passed, no complaints. But his daughter thinks (may be) he got cured because of the surgery!! Each to his own!



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