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RESEARCH AND OBSERVATIONS: MIDDLE EAST

the same but that Mauritian conditions are more conducive to social recovery. It is impossible from the data in the paper to decide between these two.

5. MIDDLE EAST

W. Bazzoui noted differences, based on observations made in a mental hospital and in private practice in Iraq, in the symptomatology of manic-depressive illness on comparison of patients under his care with patients in the West. K. W. Bash and J. Bash-Liechti applied Zulliger's modification of the Rorschach test (known as Z test) to representative samples of a rural group and of a nomadic group in Iran. Significant differences on comparison of the two groups were found. One of their goals was to identify with the Z test individuals susceptible to psychopathology.

AFFECTIVE DISORDERS IN IRAQ by Widad Bazzoui. British Journal of Psychiatry 117, no. 537 (August, 1970): 195-203.

In this lucid and instructive paper, Bazzoui reviews some of the historical concepts of affective illness in the Arab world. He refers to the classic descriptions of melancholia and mania to be found in Avicenna's Canon. He then goes on to review data obtained from ninety-eight patients seen at the state mental hospital and in private practice. Bazzoui indicates clearly that he does not regard his sample as statistically representative, but he is nonetheless convinced that his findings do reflect certain patterns typical of mental illness in Iraq.

His major findings may be summarized as follows: (1) There seems to be a lower incidence of affective change in manic-depressives than is noted in the West. Thus, he finds that only 34 percent of the depressed patients manifested a low mood and only 37.5 of the manic patients showed elation. (2) There was a preponderance of somatic symptoms. Among depressed patients, physical symptoms occurred in almost two-thirds of the cases and were the main presenting complaints. They were localized in the chest and abdomen. (3) Ideas of persecution were very common, particularly among manics.

Bazzoui speculates that the difference in the clinical picture of affective illness as seen in Iraq and in the West may be accounted for by cultural factors. In a tightly knit tribal community where defenses of sublimation and repression are insufficiently developed, one would expect a greater tendency to projection and somatization.

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While the arguments presented to explain the clinical picture are persuasive and based on good data, they still leave the question unsettled. First, the statistical validity of the conclusions is open to question, since the cases obviously are highly selected. Second, there may be semantic factors accounting for an apparent difference in symptomatology rather than a real one. Bazzoui gives examples of the complaints which depressed patients present with, such as, "My heart feels like a cold, dark room on a winter night," "I have no eye for my children or my land," and "My heart is dead." One cannot help feeling that these people are indeed expressing sad feelings. In primitive cultures the somatic expression of sadness is probably exaggerated, but this does not negate feelings of sadness.

This paper is a valuable contribution to the growing body of knowledge about mental illness in various parts of the world. At the very least, it corroborates the notion that manic-depressive illness is wide-spread—if not universal.

J. Racy

Z TEST FINDINGS AMONG IRANIAN PEASANTS AND NO-MADS by K.W. Bash and J. Bash-Liechti. In Rorschach Proceedings. Bern: Hans Huber Publishers, 1970. Pp. 244-51.

The authors used Zulliger's modification of the Rorschach test (known as the Z test) as a part of two general psychological and neuropsychiatric epidemiological investigations in Iran. The studies were conducted between 1963 and 1965. The research had two main goals: the first was a psychological study of a representative sample of a rural and of a nomadic group; the second was to identify (with the help of the Z test) individuals susceptible to psychopathology. These individuals were then referred for detailed psychiatric examination.

The peasant group of subjects was sampled from a cluster of five small Persian-speaking villages lying in the Dez Irrigation Pilot Area of the Province of Khuzestan, southwest Iran. A public-health survey team which had recently been working in this area had supplied the villages with medical aid, thus gaining the confidence of the population and paving the way for the psychological study. The villages were just beginning to be touched by the development program of the Khuzestan Water and Power Authority.

The nomad group was an encampment of predominantly Turkish-speaking Qashqai who had halted for three days on their long north-south trek some seventy kilometers from Shiraz in the desert.