Alcoholic Hallucinosis and Schizophrenia: A Negative Study*

By MARC A. SCHUCKIT and GEORGE WINOKUR

Introduction

Many years ago Eugen Bleuler postulated a correlation between alcoholic hallucinosis and schizophrenia. In his textbook, he stated his belief that 'alcholic hallucinosis could... be a mere syndrome of schizophrenia induced by alcohol (1)'.

If this were true, one would expect alcoholics with a history of hallucinosis to show a course different from other alcoholics, a course loaded for schizophrenic-like symptoms. Further, since it is known that schizophrenia runs in families (2), alcoholics with hallucinosis should show an increased familial incidence of schizophrenia. This paper examines the demographic parameters and family histories of alcoholics with a history of hallucinosis.

Метнор

The patient material consisted of the 259 alcoholics previously reported by Winokur et al. (3). The major examination compared all probands having a history of alcoholic hallucinosis with those lacking such a history. The final material consisted of 258 probands, as one patient had no information on hallucinations recorded during her interview.

The methods of proband selection and diagnostic criteria for all illnesses, including alcoholism and schizophrenia, have been outlined in the previous publication (3). The diagnosis of alcoholic hallucinosis was made when hallucinations, usually auditory, occurred in an otherwise clear sensorium.

RESULTS

Demographic comparisons between the two proband groups are given in Table I. The probands with alcoholic hallucinosis were more often primary alcoholics, had begun drinking younger, and were older at study, thus showing a longer course of alcoholism. They tended to have had more previous admissions to hospital, and were more often unemployed or unskilled labourers. The two groups

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TABLE I
Demographic parameters in 258 alcoholic probands

	Had hallucinosis N = 61	No hallucinosis N = 197
Race-Caucasian x	····	82
Age at study 40+	51 64	76
Primary diagnosis of alcoholism	-	66
Primary diagnosis of	75	00
personality disorder	8	16
Job unskilled or		
unemployed χ	59	26
For males only (N =	59 78(N =	116) 34
8 or more previous		
hospitalizations	18	7
First alcoholic age 35+	√ 10	26
Alcoholic 20+	34	32

Using χ^2 with Yates' correction for continuity: $\sqrt{P} < .025$.

 $\sqrt{P} < .025.$ $\sqrt{P} < .0005.$

TABLE II
Family histories for 258 alcoholic probands

		Had	No
		hallucinosis	hallucinosis
		N = 61	N = 197
		%	%
Father			
Alcoholic		36	30
AD		3	5
Schizophrenic		_	ī
Mother			
Alcoholic		11	7
AD		16	15
Schizophrenic			Ĭ
Brothers		N = 92	N = 265
Alcoholic		22	26
AD		3	3
Schizophrenic		Ī	Ī
Sisters		N = 92	N = 247
Alcoholic		8	9
AD		12	10
Schizophrenic			I
Children		N = 58	N = 153
Alcoholic		5	6
AD		14	9
Schizophrenic	• •	4	_

showed no differences in longest period of abstinence or in suicide attempts. As could be expected, significantly more of the hallucinosis group were admitted to hospital as a direct consequence of hallucinations, 22 per cent versus 1 per cent respectively. Only 1 per cent of each group had a previous diagnosis of schizophrenia.

The family histories of alcoholism, affective disorder (AD) and schizophrenia are shown in Table II. The family histories of the three groups are almost identical. No clear trend of increased illness in general or of increased rates for specific illnesses are seen.

Conclusion

Alcoholics presenting with a history of alcoholic hallucinosis were not distinguishable by a prior history of schizophrenia or by a high incidence of schizophrenia within their families. Demographic factors indicated that they differed from other alcoholics by their long course of alcoholism along with many previous alcoholic admissions. This investigation lends no support to a theory linking alcoholism with hallucinosis to schizophrenia.

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