

A Case of "Double Autoscopy"

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Disorders of body image are reported to be relatively common, and have been observed in some studies to occur in as many as 25 per cent. of psychiatric patients (Lukianowicz, 1967). Reduplication of the body image, however, is comparatively rare. Although classical literature is rich in descriptions of visual hallucinations of the self, it is only comparatively recently that this phenomenon has received medical attention. Coleman (1934) wrote at length on the possible psychological significance of the "double", but it was left to Lhermitte (1951) to study such autoscopic experiences clinically and to draw attention to their medical importance.

Autoscopy has been defined as "... a complex psycho-sensorial hallucinatory perception of one's own body image projected into the external visual space" (Lukianowicz, 1958). As the definition suggests, senses in addition to vision may often be involved in the experience.

We report a case of autoscopy associated with the puerperium which we feel to be of particular interest, inasmuch as it occurred not with a single additional image but with two such images. Only one case of autoscopy in association with pregnancy has been described in the literature (McConnell, 1965). The case we report had features in common both with that of McConnell and with those reported by other authors in other circumstances (Jaspers, 1946; Lhermitte, 1951; Todd and Dewhurst, 1955; Lukianowicz, 1958).

CASE REPORT

A 32-year-old Pakistani woman presented eleven weeks after the birth of her first child, complaining that from the third post-natal day she had suffered frequent attacks of "burning" in the hands and feet, sweating, light-headedness and severe depression with frequent weeping. These feelings were associated with feelings of hostility and rejection towards the baby, which had led her to strike the child on a number of occasions. There was no history of any serious illness prior to the pregnancy apart

from an attack of typhoid in childhood, and no family history of mental illness.

Both the patient and her husband were university graduates, had worked in England for four years, and were also engaged in postgraduate studies. While preparing for an important examination the patient became pregnant. Apart from the inconvenient timing of the conception, the patient had never liked children, although she had agreed with her husband to have a child at a later date. From the second to the fifth month of the pregnancy she suffered from hyperemesis and fainting attacks. From the third month she also had recurrent attacks of biliary colic and frequent heartburn, which was attributed to a small hiatus hernia. Had delivery taken place on the expected date the patient would have been able to sit her examination a few days beforehand. Unfortunately the labour was six days early and ended in a traumatic forceps delivery. Nevertheless, four days after delivery she sat her examination (unsuccessfully), though feeling very unwell.

The patient had been very shocked by the traumatic nature of her labour, as nobody in her family had had to have instrumentation during childbirth. After the birth she found great difficulty in accepting that she had in fact been delivered at all, continuing to "feel pregnant" for many weeks after delivery in addition to being unable to accept that the baby was hers. At the time of her discharge home on the eleventh post-natal day, she was still suffering from frequent depressive moods with diurnal variation and poor sleep and appetite. During the week following her arrival home, however, her mental state steadily improved, although she suffered further severe attacks of biliary colic. Three weeks after delivery the patient was re-admitted to hospital with severe abdominal pain, and five weeks after delivery a cholecystectomy and appendicectomy were performed, a number of stones being found in the gallbladder.

Three days after her cholecystectomy the patient's mental state again deteriorated. She felt unable to move her limbs for several days, and again complained of light-headedness, sweating and profound depression. She was discharged home on the tenth post-operative day still very depressed and with constant weeping. Treatment with amitriptyline was started by her general practitioner but had to be discontinued after two days on account of excessive sleepiness. The autoscopic experiences started a few days later in the seventh post-natal week and continued on and off until her admission to a psychiatric ward in the thirteenth week.

On each occasion that the two images appeared they were both static, silent, opaque and blue in colour.

Neither image looked pregnant. They were not under the patient's control and appeared and disappeared spontaneously. Most frequently the images appeared in the early morning or evening, but they could occur at any time in the day. Nearly always they were located in the same part of the patient's bedroom, and would appear suddenly, remain about ten minutes, and then disappear suddenly. During their presence the patient always felt apprehensive and "unable to move a muscle".

One image always appeared sitting in a chair straight ahead of the patient. It was always dressed in a blue sari which the patient recognized as her own. Although the patient felt a strong sense of ownership of the image—"because it was another me"—the image appeared oblivious of the patient's presence and there was no contact between them. The image always looked very depressed, and the fact that it was not pregnant (. . . "and had therefore been recently delivered") reminded the patient of the suffering she had been through.

The other image, occurring simultaneously with the first image covered the patient's body ". . . like a mask, but was separated from it by a thin layer." It felt very light in weight, but ". . . although it was made of air I could feel it resting on me."

Over the weeks during which the images repeatedly appeared the patient on several occasions in the early morning thought she heard a man's voice calling to her. Sometimes the voice . . . "talked about the Holy Ghost," and on other occasions it repeated parts of the Christian marriage service.

Following her admission to a psychiatric ward in the thirteenth post-natal week, the patient was treated with a combination of imipramine and chlorpromazine. On this regime her mood steadily improved, her other symptoms disappeared and no further autoscopic experiences occurred. Repeated physical examinations and investigation revealed no abnormality. The patient was discharged from hospital after one month of treatment. Nine months later she was still very well, had had no recurrence of the autoscopic experiences, and had re-sat her examination, though again unsuccessfully.

COMMENT

As the autoscopic experiences made their first appearance shortly after a cholecystectomy operation, it is impossible to exclude completely a toxic physical cause in this disturbance of body image. However, in view of the first appearance of the images after the patient's discharge home, their continuance for some weeks without there being other evidence of clouded consciousness, and their association with a recurrence of the depressive symptoms which had followed shortly after delivery, it was considered that the phenomenon could not be readily attributed to such a physical cause.

Although disturbances of body image in

association with organic neurological disorder, have been frequently described in the literatures reports of such disturbances in association with psychiatric disorders have been very rare (Lukianowicz, 1967). Reports of *autoscopy* occurring in association with psychiatric disorders in the absence of organic illness have been even rarer. In the case of autoscopy reported here the experiences were atypical in that two images were simultaneously present. Even the presence of two "doubles" simultaneously during a non-organic psychiatric illness has, however, been very occasionally described, and indeed Staudenmaier (1912) related an experience of his own during a schizophrenic illness in which three identical Staudenmaiers kept step with him as he walked by night.

Other atypical features in the case reported here, which were reported by McConnell (1965), were the inclusion of the whole body in the visions and their appearance in daytime and in colour. The clarity of the images, the positioning of one image straight ahead, the sense of ownership felt by the patient and the reflection of the patient's mood in the facial expression of one of the images, are, however, typical of autoscopic experiences (Lhermitte, 1951; Lukianowicz, 1958). While stressing the association of autoscopy with physical disorders, Lhermitte (1951) has also drawn attention to the frequent presence of affective disturbance in the patient with the phenomenon. Such affective disturbance was a predominant feature in the case described.

Todd and Dewhurst (1955) and McConnell (1965) have observed narcissistic traits in the personality of the patient suffering from autoscopy. An element of narcissism was also evident in the personality of our patient, particularly in relation to the elaborate nature of her dress and in her attitude towards her husband, whom she considered in every way her inferior.

As with the patient described by McConnell, low scores for visual imagery were obtained by our patient on detailed psychometric testing.

Attention has been drawn by some authors to the part played by wish-fulfilment in the psychodynamics of the "double" (Jaspers, 1946; McConnell, 1965). No firm evidence to support such an idea was found in the case

reported here. However, the fact that neither image appeared as pregnant, while the patient denied having been delivered and continued to *feel* pregnant, might, in spite of the patient's explanation of the situation, be taken as supporting such a hypothesis. The coexistence of the illusion of pregnancy with the autoscopic hallucination could be regarded as a projection of her ambivalent attitude to childbirth.

SUMMARY

A case of autoscopy associated with the puerperium is described. The very unusual nature of the double image is discussed and compared with some previous reports of autoscopic experiences.

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