

'Split personality' and the stigma of schizophrenia

Most medical students realise that 'split mind' is not an accurate description of the illness we call schizophrenia. This seems so obvious to mental health professionals that debate on this linguistic anomaly is almost non-existent. Unfortunately, the general public does not share this insight into the nature, or otherwise, of schizophrenia. The word schizophrenia may have been adopted by both ICD-10¹ and DSM-IV², to describe the relatively common psychotic disorder, but is it an appropriate one to describe such a complex condition?

Eugene Bleuler³ coined the term schizophrenia in 1908. It is derived from the Greek words schisma and Phren, and literally translates as split mind. Bleuler used the term to emphasise the loosening of associations seen in what was then known as Dementia Praecox. Ironically, the psychodynamic view of schizophrenia, which inspired Bleuler, has long since been abandoned in favour of the modern biological model. However, the name he coined persists.

The historical origins and derivation would be irrelevant, if the word did not also have the alternative meaning of split mind, (often translated as split or dual personality). Unfortunately, this alternative meaning is a much simpler concept. It is not surprising, therefore, that it is this 'split personality' meaning, which is often understood by the public. This in turn conjures up images of Jekyll and Hyde characters that are dangerously unpredictable, contributing to the stigma associated with the condition and confusing patients, carers and the general public.

A further problem is that the word, which correctly refers to split personality and also suggests mental illness, proves

irresistible to those who wish to describe the behaviour of others in a derogatory way. It is difficult to think of the name for any other medical condition, which, because of a legitimate alternative meaning, is regularly used in common speech in such a manner. In view of this technically correct, but derogatory, use of the term, we, as psychiatrists, should seriously to consider its continued medical usage.

It is hoped to stimulate a debate on our continued usage of the term schizophrenia. The case for change is about how we explain a complex disorder to our patients and to the public. It is about minimising the stigma associated with the condition rather than contributing to it.

What alternative name could be used? Bleuler, in describing a specific aspect of the condition, inadvertently coined a name that has been adopted to describe the disorder as a whole. He was, of course, influenced by the times he lived in. The name reflects the influence which psychoanalysis had on psychiatry in the early 20th century. Any attempt to coin an alternative descriptive term would inevitably reflect current thinking and hence, as with Bleuler's term, could be seen inaccurate and outdated to future generations. It may therefore be wise to avoid a descriptive term altogether.

Perhaps a neologism is required!

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References

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3. Bleuler E. Dementia Praecox or the Group of Schizophrenias. Translation: Zinkin J. New York: International Universities Press. 1950.

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