

## PERSONAL STUDIES IN ULCERATIVE COLITIS.

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PATIENTS suffering from this disorder (ulcerative colitis) more frequently than usual refer its onset and relapses to "worry", and frequently appear mentally abnormal even to the casual observer.

Forty-one unselected patients suffering from ulcerative colitis have been submitted to a clinical and psychological examination. A simple mathematical method, based on childhood characteristics, permitted an unbiased division of the patients into a number of groups:

*Group I.*—17 patients described themselves as over-conscientious and over-scrupulous children. More than 10 of these were shy, timid, over-sensitive and withdrawn, hard-working, exceedingly ambitious and unduly worried about their achievements. They were often over-clean and over-tidy.

*Group II.*—12 patients described themselves as excitable in childhood. At least 7 of these were obstinate, stubborn, argumentative, cantankerous and overtly aggressive. In general they were jolly, happy-go-lucky, and did not care very much about their achievements. They had "heaps" of friends and enjoyed "showing off". They were prone to display their emotions.

*Group III.*—The 6 members of this group were quiet, unassuming and accommodating. They kept in the background as much as possible, blushing on the slightest occasion, and their feeling of inferiority prevented them from association with other children—they would brood over an often imaginary slight for days.

*Group IV.*—This consists of 6 cases which did not fit in with any of the groups.

The same qualities of character displayed in childhood were found in the adult, often in an accentuated form:

*Group I.*—Most members of this group were over-conscientious and over-scrupulous in their work, unusually ambitious, tireless workers, and yet haunted by a fear of incompetence; meticulous, frequently wasting their time on needless details; apt to be solitary. They showed little outward sign of emotion, and sexual disorders and conflicts of an immature type were common. Thirteen out of 17 displayed gross obsessional symptoms. The group includes a full-blown obsessional neurosis, a split schizoid personality and a schizophrenic.

*Group II* were emotionally labile, with free display of emotions and rapid changes of mood. Ranging in manner from happily garrulous to defiantly silent or petulant or childishly argumentative; many of them were histrionic and childish in their behaviour, superficial in their interests and much less efficient at work than Group I. They had many acquaintances and few friends. Gross sexual disorders were uncommon; 5 out of 12 showed gross hysterical manifestations, e.g., astasia, abasia, etc. A case of manic-depressive insanity is included in this group.

*Group III* consisted of patients who gave a history of severe lifelong difficulties in relation to their family, finance and work. Most of them were shy, quiet and depressed in their manner.

*Group IV* was the mixed residue.

In over half of the patients studied the colitis was ushered in by gross emotional disturbances. Problems related to responsibility predominated in Group I; problems of personal relationships in Group II.

Long-standing psychological abnormalities and disorders far beyond the range of individual differences of the average population were found in 38 out of 41 patients suffering from ulcerative colitis. Disturbing events of a nature specific to the personality concerned frequently preceded the onset, increase or return of symptoms.

The ætiology of ulcerative colitis is considered obscure. In our observations the occurrence of the disease in psychologically abnormal individuals under emotional stress was the only constant ætiological factor. Since ulcerative colitis is a relatively rare disease and the psychological disorders described are fairly common, the complete psychodynamics of the disorder await discovery. It is to be hoped that psycho-analytical research will enable a complete solution to be found.