PERSONALITY ASSESSMENT WITH THE CATTELL 16 PF TEST IN ULCERATIVE COLITIS PATIENTS

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ABSTRACT

Personality study of a group of 20 confirmed cases of ulcerative colitis and compared with a control group of 20 Koch's Abdomen representing chronic abdominal patients by using Cattle's 16 PF test and found ulcerative colitis group revealed higher values in factor I, which is statistically significant. Personality of ulcerative colitis patients of our country significantly vary from those of western countries.

Key words: Ulcerative colitis, koch’s abdomen, cattells 16 PF

One of the first studies of patients with ulcerative colitis was made by Murray in 1930. In his opinion, emotional immaturity and fearfulness constituted the outstanding traits of patients with ulcerative colitis. Wittokower (1938) analysed the personalities of 40 patients with ulcerative colitis and concluded that 35 of them displayed psychological abnormalities. Mahoney et al. (1949) studied 20 patients with ulcerative colitis and found that neurotic traits existed before the development of colitis and were not the result of onset of illness.

The purpose of the study is to assess personality characteristics with the Catell 16 PF test in ulcerative colitis patients and correlate with that chronic patient of Koch’s abdomen.

MATERIAL AND METHOD

This study was carried out among 20 confirmed ulcerative colitis patients and 20 Koch’s abdomen (representing chronic abdominal patient) as control at Civil Hospital, Ahmedabad where facilities for detail investigation, diagnosis and treatment of disease entities under study were available.

Initial rapport with the patient was established and the patient was made to feel that the investigator had time and was interested in his problem. Psychiatric evaluation of personality pattern was done by using 16 PF questionnaire (From A.V.S.J. Hindi version by Kapoor of Cattell's Form).

After explaining in detail each patient was given the questionnaire and the answer sheet. Those who were illiterate or did not know how to read or write Hindi, their answers were marked by the first author by translating from Hindi to Gujarati with the help of interpreter. Children below 10 years were excluded from the study as it was found difficult to administer this test to them.

With the help of Keys, first raw score and then stern score was calculated.
Patients were classified on ten point rating scale for each personality factor in 3 groups, i.e. low score (0 to 4), average (5 to 6), high score (7 to 10). All the patients were rated accordingly for all the 16 personality factors.

RESULTS

Table

DISCUSSION

Personality studies of patients with ulcerative colitis have been carried out by many workers. Esler (1973) studied levels of anxiety and neuroticism by using CMI. Fullerton et al. (1962), Liedtke et al. (1977), West (1970) have studied with MMPI. In the present study every aspect of personality has been evaluated with the help of 16 PF test. Patients are evaluated on all 16 personality factor to get the global aspect of personality.

Esler (1973) in this study did not find any significant difference on the levels of anxiety and neuroticism using CMI. Fullerton et al. (1962) in their study of 47 cases with MMPI found 50% had D as the highest score or second highest and 60% had D as one of the 3 highest scales. West (1970) in his study found that ulcerative colitis patients were less emotionally disturbed. Liedtke et al. (1977) found ulcerative colitis patients have a tendency to hypochondriasis, depression, paranoia and social introversion. Boleloucky (1974) made a study of a group of 10 men for ulcerative colitis and compared a control group of 121 healthy men by using Cattell's 16 PF and found ulcerative colitis group revealed higher values in factor A,C,L. i.e. they are outgoing, easygoing, participating, suspicious, self opinionated and having a high ego strength than the control group. In this study ulcerative colitis patients differed significantly on factor I (chi square value 6.17 at d.f.=2; p<0.05), i.e., they are tender minded, dependent, overprotected and
sensitive whereas significant number of control group scored low or average on factor I. In factor 0, 50% ulcerative colitis patients scored high, i.e. they are apprehensive, worrying, depressive, troubled but the finding was not statistically significant with control group. In Indian culture these traits are prevalent which are more accepted and respected and there is more repression which may be causing greater unconscious tension reflecting into gastrointestinal symptoms. Secondly Indians are more passive, compliant, obedient and develop unilateral dependant relationship with parents and authority figures as compared to western people who are more independent, aggressive and assertive in nature. These may be the contributory factors in significant difference in personality of ulcerative colitis patients of our country from those of western countries.

REFERENCES


