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Insight into the Mind Rubric Delusion and its Interpretation Through Kent's Repertory

Dr Bharati Kalpesh Patil^{1*}

¹Associate Professor, Homoeopathy Repertory, Bhopal

*Corresponding author

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Abstract

A delusion is a false as well as fixed belief that is maintained despite strong evidence to the contrary. It's not the same as a cultural or religious belief, and it's often disconnected from reality. A delusion is a fixed false belief based on an inaccurate interpretation of an external reality despite evidence to the contrary. The diagnosis of a delusional disorder is made when a person has one or more non-bizarre (situations that are not real but also not impossible) delusional thoughts for one month or more that cannot be explained by any other condition. An individual's cultural beliefs merit consideration before coming to the diagnosis. Cultural beliefs also impact the content of delusions. In patients with delusional disorder, delusions(s) do not impact the functionality and the patient's behaviour is not overtly bizarre. This activity reviews the evaluation and management of delusional disorder and highlights the role of the interprofessional team in caring for affected patients. Delusional disorder is a relatively rare mental health condition with a lifetime prevalence estimated at around 0.02%. It's more common in women and tends to have an onset in middle to late adulthood, though it can occur as early as 18 and as late as 90. While it's less prevalent than other psychotic disorders like schizophrenia, it can be underdiagnosed due to a lack of insight in individuals with delusional beliefs. The lifetime prevalence of delusional disorder in India is estimated to be around 0.025-0.03%. Homeopathy offers a holistic and individualized approach to managing the psychological challenges associated with delusions homeopathy focuses on the patient's emotional and mental state, considering unique symptoms and experiences.

Keywords: Delusion, Schizophrenia, Holistic, Homoeopathy, Repertory, Kent

Introduction

Freud suggests that delusions are manifestations of unresolved conflicts between an individual's psychological agencies: the *superego*, *ego*, and *id*. Despite over a century of interest in this phenomenon, no single unifying theory has been comforted; however, postulations suggesting psychological, neurobiological, cognitive, and emotional etiologies have been offered. It's a distinct mental state, not simply a misinterpretation or a personal opinion. Delusions are a common symptom in various mental health conditions, including schizophrenia and

delusional disorder. They frequently occur in various psychiatric disorders and can precipitate in isolation or as sequelae of medical conditions. Proper evaluation of delusions involves distinguishing them from other cognitive disturbances, understanding their psychological underpinnings, and assessing associated risks to ensure comprehensive care

Roberts (1992) proposes a model with 3 stages of delusion

1. **Pre-Psychotic:** In this phase, much like the stress-diathesis model, a person with an innate vulnerability or predisposition to a psychotic-type illness is exposed to a stressor, which serves as the antecedent.
2. **Acute phase:** In this phase, the person begins to experience unusual or idiosyncratic feelings, which become the seeds of delusions. If personal meaning is attributed to these ideas and sensations, "simple delusions" are formed.
3. **Elaboration:** In this phase, further form is given to these simple delusions, which are expanded upon and elaborated. This personalized meaning and associated ideas become incorporated into current thinking, increasing the complexity and rigidity and reinforcing any perceptual distortions and attribution of meaning.

Evaluating delusional states can prove difficult, even for the seasoned clinician. Before a psychiatric evaluation, the clinician should rule out delusional manifestations in the setting of a medical disease. No specific diagnostic test exists to identify delusions; however, the following factors should be considered essential in any clinical evaluation.

- **Genetics and family history as a risk factor:** A positive family history of mental disorders should be considered a risk factor in symptom expression.
- **Environment as moderator:** Smeets et al (2014) noted evidence suggesting environmental implications on the manifestation and theme of delusions.
- **Early exposure to trauma as a specific risk factor:** There is a significant body of research on the link between early/childhood exposure to trauma and the subsequent development and severity of delusions. Some researchers have proposed that the type of trauma may impact the level of risk and the expression of the delusional material.
- **Tenacity of beliefs:** Despite their encapsulation, these beliefs are impervious to reasoning, evidence, and argument; attempts to confront the delusions may precipitate resistance, early treatment termination, and alienation from the patient.
- **Content and culture:** Delusions appear in many cultures. Persecutory delusions appear most frequently, followed by religious and grandiose delusions. However, recent research indicates that the delusional content and expression partly reflect the person's culture and the socio-economic and political events experienced by that person.

Some of the most frequently encountered types of delusions are:

1. Delusional jealousy - That one's sexual partner is unfaithful.
2. Bizarre - A delusion involving a phenomenon that is impossible, not understandable, and unrelated to normal life.
3. Erotomantic - A delusion that another person, more frequently someone of higher status is in love with the individual.
4. Grandiose - A conviction of great talent, discovery, inflated self-worth, power, knowledge, or relationship with someone famous or deity.
5. Persecutory - The central theme is being conspired against, attacked, harassed, obstructed in the pursuit of long-term goals.
6. Somatic - These involve bodily functions and sensations.
7. Mixed - No single theme is prevalent.
8. Thought broadcasting - Delusion that one's thought is projected and perceived by others.
9. Thought insertion - A delusion that one's thought is not one's own but inserted into their mind by an external source or entity.
10. Grandeur
11. Delusion infidelity
12. Religious delusion

Management :

In case of delusion educational activity enhances healthcare professionals' competence in diagnosing and managing delusions. Participants learn to identify delusions accurately, understand their origins, and apply targeted therapeutic interventions. The curriculum emphasizes collaboration within an interprofessional team, integrating psychiatry, primary care, and social support to optimize treatment strategies. This approach improves patient care, fosters early intervention, and supports holistic management, ultimately enhancing patient outcomes.

How homeopathy can help

1. **Emotional Balance:** Homeopathic remedies aim to restore emotional stability and reduce anxiety or paranoia.
2. **Addressing the Root Cause:** Homeopathy considers underlying factors such as trauma, stress, or mental health imbalances.
3. **Holistic Healing:** Remedies target the mind and body as a whole, promoting overall well-being.

Here are some commonly used homeopathic remedies that may be considered based on the patient's unique symptoms and kents's repertory rubrics are given which helps in homoeopathic prescription

1. Stramonium

indications: Fear of darkness, paranoia, or feeling constantly watched.

Use Case: Helps individuals with intense fear and confusion who feel trapped or observed.

Rubric:

1.kent[mind] delusion, imagination hallucination ,illusion ,watched,that she is being

2. **kent[mind]** delusion, imagination hallucination ,illusion ,strange everything is
3. **kent[mind]** delusion, imagination hallucination ,illusion,enlarged body part is
4. **kent[mind]** delusion, imagination hallucination ,illusion devine he is

2. **Anacardium Orientale**

Indications: Feelings of duality, suspicion, or mistrust toward others.**Use Case:** Effective for individuals experiencing paranoia and the belief that others are conspiring against them.

Rubric:

1. **kent[mind]** delusion, imagination hallucination ,illusion, enemy surrounded by
2. **kent[mind]** delusion, imagination hallucination ,illusion: child not hers
3. **kent[mind]** delusion, imagination hallucination ,illusion: churchyard: visits
4. **kent[mind]** delusion, imagination hallucination ,illusion: dead person, sees

3. **Hyoscyamus Niger**

Indications: Delusions of persecution, jealousy, or being spied upon.

Use Case: Suitable for those who feel threatened by their environment or have irrational fears.

Rubric:

1. **kent[mind]** delusion, imagination hallucination ,illusion: is being injured by his surrounding
2. **kent[mind]** delusion, imagination hallucination ,illusion: animals of
3. **kent[mind]** delusion, imagination hallucination ,illusion: cup in moving
4. **kent[mind]** delusion, imagination hallucination ,illusion: calls for absent person

4. **Lachesis**

Indications: Overthinking, loquacity, and mistrust.

Use Case: Helps individuals who are overly suspicious and feel suffocated by their surroundings.

Rubric:

1. **kent[mind]** delusion, imagination hallucination ,illusion: floating in air
2. **kent[mind]** delusion, imagination hallucination ,illusion: is under a powerful
3. **kent[mind]** delusion, imagination hallucination ,illusion: body lighten than air

5. **Belladonna**

Indications: Intense fear, confusion, and hallucinations.

Use Case: Ideal for acute episodes of delusions accompanied by restlessness or heightened senses.

Rubric:

1. **kent[mind]** delusion, imagination hallucination ,illusion: faces sees closing eyes, on
2. **kent[mind]** delusion, imagination hallucination ,illusion : fancy illusion of
3. **kent[mind]** delusion, imagination hallucination ,illusion:touching everything
4. **kent[mind]** delusion, imagination hallucination ,illusion: inanimate objects are person

6. Arsenicum Album

Indications: Anxiety, restlessness, and fear of being harmed.

Use Case: Effective for individuals with persistent worry and feelings of insecurity.

Rubric:

1. **kent[mind]** delusion, imagination hallucination ,illusion: arrested is about to be
2. **kent[mind]** delusion, imagination hallucination ,illusion: injury is about to receive
3. **kent[mind]** delusion, imagination hallucination ,illusion: insects sees

Conclusion

If one believes that someone close to them is exhibiting symptoms of Delusion they should seek the assistance of a mental health professional immediately

homeopathy is a safe practice, but it should be employed under professional guidance, more so if used along with psychotropic medic homeopathy offers a holistic approach to treating the disease. The remedies mentioned above can treat the underlying causes of the condition and offer relief from the discomfort. However, it is important to consult a qualified homeopathic practitioner for the correct dosage and duration of treatment.

It has been found that proper case taking ,administration of suitable similimum at suitable interval in suitable potencies and proper follow up of cases using homeopathic kent repertory lead to improvement of the mental disorders. Dr J.T. Kent has studied these delusions in minute detail and hence kent's and kent's materia medica will be immensely helpful for interested homeopathic practitioners.

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