Perspectives

Illusory delusions

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The experience of parasites crawling over one's skin, invisible to others, is an uncommon and distressing complaint. Treatment usually offered is not directly for the troubling symptom but for an associated sign that we elicit on mental state examination. The sign elicited by us, a delusion, is generally treated with antipsychotics. The delusion is thereby promoted to the status of a disorder. Well and good, we may say, given that some patients improve with antipsychotic medications.

Mixing up symptom, sign and diagnostic entity leads to confusion. The probability is high that all people who think that their troubling sensations are produced by unseen parasites are diagnosed as having a delusional disorder. But some of them experience this strange symptom secondarily. Their primary condition may be multiple sclerosis, diabetes mellitus, vitamin B 12 deficiency, drug use or something else. Naming the finding a 'delusion of parasitosis' in such instances is wrong - even when an explanation such as, 'secondary to cocaine use,' is added. The mental state finding in such instances is strictly a disturbance of sensation, not of thought. There probably are real sensory impulses reaching the brain, here being perceived as caused by insects. If there are no sensory impulses, these sensations could - or should - be called hallucinations.

Other underlying reasons

Some of us whose homes provide spaces that birds use to build nests, discover that these contain millions of mites, fleas and other tiny arthropods that swarm out soon after the nestlings depart. They settle on humans who linger beneath the recently vacated nest – crawling and biting to make their presence felt. The offenders are only just about visible to the diligently deployed naked eye, and easily missed on cursory examination.

Then there are said to be billions of tiny mites that inhabit all skins, totally invisible to the naked eye. Cannot the activities of these creatures tip sensitive dry skins into itching? Such sensations will appear objectless. Many experiences of this kind, if not hallucinations, may well be illusions.

The drying and brittle skin of the elderly may produce itching and irritation even without assistance from arthropods. The sufferers' interpretation of the experience as insects crawling on the skin is secondary. Such sensations too may strictly be illusions, not hallucinations or delusions.

Implications?

First are implications for how we apply labels such as symptom, sign, and disorder. We may easily be led into labelling normal sensations as hallucinations or illusions and into calling illusions hallucinations. Worse, we may carelessly label some illusions, or hallucinations, as delusions based simply on standard practice in our profession.

Then there are implications for management. The complaint in question is most often seen among the elderly. And they are often referred to psychiatrists. If doctors previously consulted had not done so, a quick trial of treating the experience as an illusion, or hallucination, is warranted. I have been surprised by the miraculous relief reported by a small number of elderly sufferers treated with skin hygiene measures alone. This perspective is provoked by the response of a person whose recovery resulted from a recent informal suggestion to a friend, about her elderly parent's unremitting complaint. Nothing is lost by first recommending regular moisturizing agents for the affected area, where feasible. Looking for and dealing with other likely causes of illusions can also be undertaken. Treating as a possible delusion or disorder should be considered only if simple steps for dealing with the symptom as an illusion or hallucination fail.

I wonder whether some previous failures among my elderly patients were due to the patient or family not being diligent enough with the moisturizer, considering it too trivial a 'remedy' to take seriously. I should have tried, in the instances where it failed, deploying the moisturizer under supervision, in the hospital. Too late now.

Conflicts of interest

None declared.

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