THE PRE-PSYCHOTIC PERSONALITY IN DEMENTIA PRÆCOX

Study of 100 Cases in the Navy

BY LEOPOLD BELLAK, M. A., M. D.,* AND BLANCHE PARCELL, M. S.**

One of the more time-honored hypotheses concerning dementia præcox,† contends that there is a typical pre-psychotic personality associated with this disorder. This particular personality-pattern is said to be characterized by an outstanding tendency for introversion.

Jung¹ originated the concept of introversion as a psychological type. However, Bleuler,² Kretschmer³ and many others are as responsible for linking introversion with schizophrenia as Jung himself. In this hypothesis, the assumption was that introversion is an outstanding characteristic of the schizoid personality, and that schizoid personalities were related to and frequently the forerunners of full-blown schizophrenic pictures. It was not held that every schizoid person would necessarily become a schizophrenic, but rather that a schizoid personality with introversion was usually found in schizophrenic patients.

Bleuler,³ for instance, considered the schizoid a personality type in which the interest or libido is directed more to the inner life than to the outside world. He further believed that there is a higher percentage of schizoid personalities in the families of dementia præcox patients than in the families of the general population. Kretschmer³ expressed his belief in the relationship between the introvert schizoid and the schizophrenic in his theories concerning body types. According to him, the asthenic tends to be schizothymic when normal, and to acquire a schizophrenic disorder rather than anything else when he becomes mentally ill.

We find in the "Dictionary of Psychology" the following definition: "Schizoid: resembling or pertinent to schizophrenia, to which individuals of this type are subject." In the "Psychiatric Dictionary" one finds the following: "The intensely schizoid indi-

*Medical officer, St. Elizabeths Hospital, Washington, D. C.
**Psychiatric case supervisor, A. R. C., St. Elizabeths Hospital, Washington, D. C.
†"Dementia præcox' and 'schizophrenia' will be used interchangeably throughout this paper.
individual may become schizophrenic; it is estimated that not less than 60% of schizophrenic patients show exaggerated schizoid tendencies prior to the development of schizophrenia.” And elsewhere in the same dictionary: “The majority of dementia praecox patients come from those individuals known as ‘shut in,’ introverts, or daydreamers; from those who do more thinking than acting; from those who are essentially asocial.”

The present study was designed to test the assumption that schizophrenics have a typical history of an introvert pre-psychotic personality. For a definition of the terms employed, the writers relied on Jung, calling a man extroverted “when he gives his fundamental interest to the outer or objective world, and attributes an all-important and essential value to it; introverted, on the contrary, when the objective world suffers a sort of depreciation or want of consideration for the sake of exaltation of the individual himself.”

**Material and Procedure**

One hundred cases were studied of patients at St. Elizabeths Hospital, constituting 100 consecutive navy admissions to this hospital, diagnosed as some form of dementia praecox at the official admission conference. (This admission conference meets at least six weeks after the patient’s admission to the hospital and always takes place under the direction of a clinical director and in the presence of the staff.) Navy cases were selected, since they had the benefit of thorough social work-ups by workers of the Red Cross and its local chapters. It was believed that the selection of consecutive cases would give a random sample. Six cases had to be discarded because of inadequate social histories, and the next six consecutive cases were taken instead.

The case records were studied for all information available concerning the patients’ pre-psychotic personalities. The main information was usually obtained directly from the social worker’s interview with the family and such agencies or authorities as the patient may have been in contact with aside from the family. The social worker’s report was patterned after a “Social History