

Déjà vu experiences in patients with schizophrenia

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Received 26 April 2005; revised 10 October 2005; accepted 22 December 2005

Abstract

To investigate whether déjà vu experiences are psychopathologic phenomena, we studied the frequency and characteristics of déjà vu experiences in patients with schizophrenia. One hundred thirteen patients with schizophrenia and 386 nonclinical control subjects were evaluated with the Inventory of Déjà vu Experiences Assessment. The frequency and features of déjà vu experiences were compared between the 2 groups. The patients with schizophrenia had déjà vu experiences less frequently (53.1%) than did the nonclinical subjects (76.2%). The frequency of déjà vu experiences did not correlate significantly with age at evaluation or education level among the patients with schizophrenia. Most characteristics of déjà vu experiences of the patients were comparable with those of the control subjects. However, the experiences of the patients tended to be longer and more monotonous. The patients often felt alert, oppressed, and disturbed by the experiences. They appeared to have the experiences under unpleasant mental or physical states. Their déjà vu experiences are not primarily different in nature from those of the nonclinical subjects. The decreased frequency of the experiences in the patients may suggest déjà vu experiences as nonpathologic phenomena.

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1. Introduction

Déjà vu experiences are defined as “any subjectively inappropriate impression of familiarity of a present experience with an undefined past” [1]. Experiences have often been attributed to specific psychopathologic phenomena (ie, memory dysfunction [2], dissociative symptoms [3–5], and delusional symptoms [3,6]). Many investigators have suggested an increased incidence of déjà vu experiences among patients with a psychiatric disease [7–9]. In contrast, some researchers [10,11] have considered déjà vu experiences as nonpathologic mental experiences because the experiences were also observed in nonclinical populations. Schizophrenia is a common psychiatric disease with various psychopathologic symptoms, including delusions, dissociative symptoms, and cognitive dysfunction. If déjà vu

experiences are associated with such pathologic symptoms, then the incidence of the experiences would increase in patients with schizophrenia as compared with nonclinical subjects. However, there have been only a few controlled studies on the déjà vu experiences of patients with schizophrenia [12,13], with a small sample size [1,7,14]. Thus, we conducted a controlled study with a large number of subjects to examine the incidence and characteristics of déjà vu experiences in patients with schizophrenia.

2. Materials and methods

2.1. Subjects

One hundred thirteen patients with schizophrenia participated in the study. The patients were from 1 of 5 psychiatric clinics: Adachi Mental Clinic, Juntendo University Hospital, Hiratsuka Kyosai Hospital, Tenshi Hospital, and Sapporo Medical University Hospital. Schizophrenia was diagnosed in accordance with the *International Statistical Classification*

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Table 1
Déjà vu and related experiences (IDEA) in our 2 study groups

IDEA-A experiences	Schizophrenia group (n = 113)		Nonclinical group (n = 386)		Z*	P
	Mean (SD)	Median	Mean (SD)	Median		
A1. Déjà vu experiences	1.8 (1.0)	2	2.1 (0.8)	2	-3.65	.000
A2. Derealization	1.6 (1.0)	1	1.5 (0.7)	1	-0.22	.825
A3. Jamais vu	1.5 (0.8)	1	1.4 (0.7)	1	-1.06	.288
A4. Precognitive dream	1.6 (1.0)	1	1.7 (0.7)	2	-2.10	.036
A5. Depersonalization	1.6 (1.0)	1	1.4 (0.6)	1	-1.64	.101
A6. Paranormal qualities	1.4 (0.7)	1	1.3 (0.7)	1	-1.39	.164
A7. Remembering dream	2.8 (1.3)	3	2.8 (1.1)	3	-0.41	.682
A8. Travel frequency	2.6 (1.0)	3	3.1 (0.9)	3	-4.65	.000
A9. Daydream	1.2 (0.8)	1	1.1 (0.4)	1	-1.42	.156

By Mann-Whitney *U* test. Items A1-A5 and A7-A9 are ranked 1 to 5 based on the frequency of the experience (ie, 1 = never; 2 = less than once per year; 3 = a few times per year; 4 = a few times a month; 5 = at least weekly). Item A6 is ranked 1 to 4 based on reliability of the experience (ie, 1 = no; 2 = no, but not sure; 3 = yes, but not sure; 4 = yes).

* Z for Z (standard) scores.

of Diseases, 10th Revision criteria [15] by qualified psychiatrists. The patients' mean age at their first episode of psychosis was 25.8 years (SD = 7.9 years), and the mean duration of their illness was 13.5 years (SD = 10.3 years). Sixty-three patients had been admitted to a psychiatric ward at least once.

Three hundred eighty-six healthy Japanese adults were recruited as control subjects through several community services or private companies in Tokyo, Kanagawa, Saitama, Fukushima, and Hokkaido prefectures. The incidence and characteristics of déjà vu experiences in this nonclinical population have been described in detail elsewhere [10].

Inclusion criteria for participation in the study were as follows: being between 18 and 70 years old, having no state of psychomotor excitement, having no prolonged hospitalization, having no history of substance misuse, having no neurologic disease (ie, epilepsy or dementia), and having sufficient intellectual function to understand the contents of the self-administered assessment instrument. Every participant gave informed consent to participate in the study.

2.2. Assessments

All study subjects were evaluated with the Japanese version of the Inventory of Déjà vu Experiences Assessment (IDEA) [16]. The reliability of the IDEA in patients with schizophrenia was well confirmed [17]. All participants completed the IDEA part A (IDEA-A), which covers déjà vu, derealization, jamais vu, precognitive dreams, depersonalization, paranormal quality, remembering dreams, travel frequency, and daydreams. Subjects who had experienced déjà vu phenomena also completed the IDEA part B (IDEA-B). Demographic features (ie, sex, age at the evaluation, total years of education, and handedness according to the Annett Hand Preference Test [18]) were

noted in all study subjects. Clinical variables related to schizophrenia (ie, age at the first episode of psychosis, duration of illness, and history of admission to psychiatric ward) were noted in patients with schizophrenia.

2.3. Statistical analysis

Differences in demographic data were analyzed by χ^2 analysis or the Fisher exact test for categorical data and the Student *t* test for linear data. Differences in raw IDEA scores were analyzed by the Mann-Whitney *U* test, χ^2 analysis, or the Fisher exact test. The relation between each IDEA score and clinical factor was analyzed by Spearman's rank correlation coefficient. The level of significance was set at <.05, and the Bonferroni correction was used for multiple comparisons when necessary. SPSS 11.0 (SPSS Inc, Chicago, Ill) was used for all statistical analyses.

3. Results

3.1. Demographic characteristics of the subjects

The mean age of the patients at the investigation (39.3 [SD = 10.7, range = 19-67] years) was equivalent to that of the control subjects (38.4 [SD = 11.6, range = 18-69] years) ($t = 0.7$, $P = .456$). The distribution of sex in the patients (51 men and 62 women) was also equivalent to that in the control subjects (188 men and 198 women) ($\chi^2 = 0.45$, $P = .522$). The mean education level of the patients (13.2 [SD = 2.2, range = 9-16] years) was shorter than that of the control subjects (14.0 [SD = 2.1, range = 9-18] years) ($t = -3.9$, $P = .000$). The ratio of hand preference in the patients (right, $n = 90$; ambidextrous, $n = 22$; left, $n = 1$) was not different from that in the control subjects (right, $n = 315$; ambidextrous, $n = 63$; left, $n = 8$) ($\chi^2 = 1.1$, $P = .591$).

3.2. Frequency of déjà vu and related psychologic experiences

The incidence of déjà vu experiences in the patients with schizophrenia ($n = 60/113$, 53.1%) was significantly lower

Table 2
Correlation between clinical features and IDEA-A items in patients with schizophrenia ($n = 113$)

	Age (r/P)	Education (r/P)	Age at the onset of illness (r/P)	Duration of illness (r/P)
Déjà vu	-0.17/.070	0.06/.521	-0.16/.090	-0.10/.318
Derealization	-0.08/.385	-0.07/.481	-0.03/.726	-0.08/.415
Jamais vu	-0.04/.690	-0.09/.350	-0.05/.627	-0.03/.795
Precognitive dreams	-0.12/.226	0.06/.522	-0.11/.232	-0.05/.613
Depersonalization	-0.13/.161	-0.02/.793	-0.07/.495	-0.11/.254
Paranormal quality	0.00/.999	-0.02/.808	0.12/.198	-0.16/.096
Remembering dreams	-0.25/.008	-0.03/.770	-0.16/.113	-0.13/.184
Travel frequency	-0.09/.352	0.07/.484	0.09/.333	-0.19/.047
Daydreams	-0.09/.338	0.01/.926	0.06/.511	0.02/.799

Significance level with Bonferroni correction: .05/9 = .0056.

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