Prevalence of Alexithymia in the General Adult Population of Quetta, Balochistan in Pakistan

Nida Tabassum Khan*
Faculty of Life Sciences and Informatics, Department of Biotechnology, Balochistan University of Information Technology Engineering and Management Sciences, (BUITEMS), Quetta, Pakistan

*Corresponding author: Nida Tabassum Khan, Faculty of Life Sciences and Informatics, Department of Biotechnology, Balochistan University of Information Technology Engineering and Management Sciences, (BUITEMS), Quetta, Pakistan, Tel: 03368164903, E-mail: nidatabassumkhan@yahoo.com

Received date: Sep 29, 2017; Accepted date: Nov 27, 2017; Published date: Nov 30, 2017

Abstract

Alexithymia is recognized as a medical condition in which an individual fails to express his feelings rather suppressing their thoughts and face difficulties in distinctive emotions leading to a number of neuropsychiatric issues. By means of measuring emotional intensity based on the professed reality of external stimuli, inferences could be drawn to indicate distinctive response patterns of such individuals. Therefore incidence of alexithymia was studied in the general adult population of Quetta Balochistan by using a well-recognized measuring scale TAS-20. High prevalence of alexithymia was found in both the genders i.e., Males (93%) and Females (87%) suggesting that predominance of negative emotional experiences and disturbed cognitive functioning in alexithymia may result in unstable mental status of individuals with conditions like somatic complaints, anxiety, depression and even social dysfunction.

Keywords: Emotional cognition; Alexithymia; Clinical disorders

Introduction

Alexithymia is recognized as a medical condition in which an individual fails to express his feelings rather suppressing their thoughts and face difficulties in distinctive emotions leading to a number of neuropsychiatric issues [1]. Symptoms such as somatic sensations of emotional arousal, suppressiveness of feelings, limited imagination and externally orientated perception and psychosomatic disorders [2,3]. Clinical conditions including eating disorders, hypertension etc. is quiet common [4]. Besides in some studies it was revealed that alexithymia has been reported in mostly single and socially isolated individuals [5] with high prevalence among older adults [6-8]. Numerous researches on alexithymia revealed its association with autism spectrum disorders. However inability or diminished ability to understand and express emotions is a prominent symptom in alexithymic individuals [9]. In addition, alexithymic patients often display a deficiency in understanding and produce inappropriate responses to situations, perhaps due to their inability to understand feelings of other people or situations [10]. Defective emotional perception is another well recognized feature of alexithymia leading to impaired cognition. Emotional cognition is based on how situations or people are perceived i.e., how a stimulus is understood. It influences the intensity of emotional response [11]. Since perception of a situation varies from person to person therefore intensity of emotional responses also varies from individual to individual and in case of alexithymics, one is unable to correctly appraise a situation [12,13]. With age and exposure, people can learn different ways to properly recognize and express emotions [14]. However in several studies it was reported that individuals displayed a stronger emotional response to a real disturbing stimulus than a fictional one [15]. But in case of alexithymics problem in processing and identifying emotions weakens their ability to empathize with emotional stimuli [16]. Thus by means of measuring emotional intensity based on the apparent reality of external stimuli, deductions could be made to reveal the response patterns of such individuals. Number of attempts have been made to develop measuring scales for alexithymia. In 1985, the TAS-26 Scale (26-item Toronto Alexithymia) was developed [17] and later a revised version of TAS-26 was developed in 1994 as TAS-20 [18]. It is considered to be the most suitable existing measuring scale for alexithymia with good reliability and validity [19]. TAS-20 scale is structured on three basic factors that identifies three separate aspects of alexithymia that is difficulty in identifying feelings and distinguishing them from somatic sensations; emotional suppressiveness; and external oriented thinking pattern which is defined as the cognitive style characterized by obsession with the facts of external events rather than thought content related to emotions and imaginations [18,19]. The main aim of this research was to find the pervasiveness of alexithymia in the general adult population of Quetta Balochistan, since very little is known with respect to this specific population.

Materials and Methods

This research survey was conducted in Quetta, Balochistan. Included participants were selected at random in this study keeping the sample size of 400 i.e., 200 males and 200 females and were mostly undergraduate students in different educational institutes of Quetta. Participants with any history of chronic medical illness, psychiatric illness, neurological damage or disease were excluded from the study. A well-recognized scale TAS-20 was used as a measuring scale for alexithymia. TAS-20 scale construct is based on three most important factors (Factor 1- Difficulty in identifying feelings; Factor 2-Difficulty in describing feelings; Factor 3-Externally oriented thinking) [18] which help in identifying alexithymics individuals, besides demographic information was also obtained from the participants. Alexithymia score ≥ 61 indicates higher degrees of alexithymia and ≤
Results and Discussion

Our findings revealed the cognitive dimension of alexithymia in a sample size of 400. Several studies confirmed that the affective dimension of alexithymia, may differentially affect emotional processing in males and females [20,21]. As in our case alexithymia was more prevalent in males (93%) than females (87%). However the difference in prevalence rate between the two genders was not that much as indicated in (Figures 1-3). In addition our study also reported that alexithymia is also associated with anxiety and depression [22]. Since its signs were observed in both the genders along with other alexithymia associated clinical symptoms. However the levels of depression may differ in males and females but it alters the acuity of emotional prosody in both the sexes [23,24].

Consequently, it is crucial to take alexithymia dimensions into consideration and also to control for levels of depression in future studies on prosodic perception in alexithymia. As it is well comprehended that preponderance of positive emotive experiences in an individual's life reduces the likelihood of psychosomatic related problems while predominance of negative emotive experiences may result in unstable mental status resulting in psychosomatic complaints, anxiety, depression and even social dysfunction as indicated in alexithymic individuals. This pattern of correlation between the dimensions (factors) of alexithymia and psychosomatic health also reveals the possibility that anhedonia and proneness to negative emotions associated with alexithymia may be a factor responsible for the impaired mental health of alexithymic individuals [25]. It is also evident that alexithymia may lead to high negative affect and/or reduced positive feelings which in turn may lead to poor mental health. Our findings support the earlier observations that high incidence of alexithymia in both the genders is associated with poor mental health because such individuals faces difficulty in identifying and communicating emotions and feelings to others leading to cognitive discrepancy. During our research it was also noted that the apparent symptom of recurrent anxiety was seen in both the genders with difficulties in identifying and describing emotional states [26]. The overall prevalence rate of alexithymia suggested that greater inclination towards negative emotions is quiet common in alexithymic individuals along with decreased capacity to experience positive emotions [27-30]. Based on the three dimensions (factors) of alexithymia, emotional regulation is also disturbed in such individuals that suffer from impaired cognition [31]. Therefore, emotional suppressiveness found in alexithymics may be an important contributing factor responsible for damaging effect on mental health [32-35]. Based on our findings it was revealed that overall high incidence of alexithymia and its associated symptoms was found in the general adult population of Quetta, Balochistan affecting both the genders. Such individuals not only suffer from cognition dysfunction but also from emotion regulation difficulties leading to unstable mental health [36,37].
Conclusion

Our results therefore revealed that alexithymia is associated with numerous impaired mental and physical health issues. As an outcome individual suffers from emotional suppressiveness. However, some other cognitive deficits in alexithymic individuals are potentially linked with mental problems may be due to the reason that emotion regulation difficulties may arise as a possible mediator in causing alexithymia and its associated symptoms.

References