The Somatosensory Amplification in Vitiligo and Chronic Urticaria Patients: A Controlled Study

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Introduction

Vitiligo is a common acquired disorder that has an estimated incidence of 1-4% [1]. It is inherited either polygenic or autosomal dominant, with incomplete penetrance and variable expression. Approximately in half of the patients vitiligo developed before the age of 20 [2]. It is characterized by a fairly symmetric pattern of circumscribed macules and patches of amelanosis. Vitiligo has a considerable social and psychological effect on patients because of alteration of appearance [3,4]. On the other hand chronic urticaria not only affect the appearance but involves physical discomfort and others view skin lesions as stigmatizing [5,6]. Chronic urticaria is a skin disorder which is characterized by wheals and itching. The characteristics of wheals are sudden, lightning quick appearance, sudden redness and swelling which almost signify the explosiveness of an emotion-affective reaction, such as resentment, anger and aggressiveness, presence of pruritus with consequent scratching (even compulsive) signifying anger, tension, aggressiveness as well as embarrassment and shame, the sudden disappearance of the reaction. Suffering chronic urticaria have constant personality characteristics: marked hyperemotivity and anxiety, frequent and extreme states of worry, sensitivity, sense of insecurity and little self-confidence [7].

Somatosensory amplification refers to the tendency to experience bodily sensation as intense, noxious, and disturbing. Individuals focus on unpleasant sensations and to consider them as pathological rather than normal [8,9].

Amplification involves three elements: 1. hyper vigilance, or heightened attentional focus on bodily sensation; 2. a tendency to select and concentrate on certain relatively weak and infrequent sensations; and 3. the disposition to react to somatic sensations with affect and cognitions that intensify them and make them more alarming, ominous, and disturbing. People amplify normal physiologic sensations as well as the symptoms of serious medical disease. Thus, amplification encompasses a wide range of somatic stimuli and bodily states, and it is not limited to those sensations that are symptomatic of disease. Amplification is both a state and a trait [9].

A variety of bodily sensations can be amplified: 1. normal physiological sensations such as intestinal peristalsis. 2. benign dysfunctions, dry skin 3. the visceral and somatic concomitants of intense affect, such as the sympathetic arousal accompanying anxiety 4. the symptoms of serious nonpsychiatric medical disease [8].

Amplification may serve as a pathogenic mechanism in hypochondriasis, for example, or it may be a more nonspecific concomitant of many psychiatric disorders that are characterized by prominent somatic features.

The aim of this study was to assess the somatosensory amplification in vitiligo and chronic urticaria patients and make a comparison with healthy controls.

Method

The study populations were recruited from dermatology outpatient clinics at four major hospitals in Istanbul, Leprosis Teaching and Research Hospital of Dermatology, Haseki Teaching and Research Hospital, Istanbul University Cerrahpaşa School of Medicine, Şişli Etfal Teaching and Research Hospital, from February 2003 to December 2004. The diagnosis of vitiligo and chronic urticaria were made by dermatologist by inspection and bacterial, fungal infections or allergic reactions were excluded. 50 vitiligo, 50 chronic urticaria patients, aged 16-60 years were compared with age- and sex- matched 50 healthy controls.

After the procedure had been explained, all subjects gave their written informed consent. The sample completed: 1. The sociodemographical data form. 2. Somatosensory Amplification Scale (SSAS) 3. The Turkish version of the Structured Clinical Interview for DSM-IV Mental Disorders (SCID-I).

SSAS was developed by Barsky et al. in 1990. It is a self-report questionnaire with 10 items which cover a range of uncomfortable bodily sensations, most of which generally do not connote serious disease [9]. For example, two of the items were “hunger contractions” and “various things happening in my body”. It assesses the sensitivity of normal somatic and visceral sensations [10,11]. Somatosensory amplification refers to the tendency to experience bodily sensation as intense, noxious, and disturbing. Somatosensory amplification represents the pathologic mechanism in hypochondriasis [8,10,12].

SPSS for Windows version 10.0 was used for data processing and analysis. ANOVA and Tukey HSD was used to compare three groups for quantitative variables Qualitative features among the groups were compared by χ² test and Fisher-Exact test.

Results

48% of the vitiligo group are females, 52% are males; 68% of the chronic urticaria group are females, 32% are males; 50% of the control group are females. The age range of the sample is 16-60. The mean age of vitiligo group is 35.82 ± 12.56, chronic urticaria group is 36.66 ± 10.6, control group is 35.98 ± 12.49. 50% are males. 58% of vitiligo, 70% of chronic urticaria, 68% of control group are married. There is no statistically significant difference about age, gender, education and marital status among the groups (p>0.05). The sociodemographical features of the three groups are presented in Tables 1 and 2.

The rates of dysthymic disorder and generalized anxiety disorder

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well. Manifested by one member of a group, others soon experience them as having an infectious quality; once the symptoms are noticeable, the noxiousness of the symptom seems to furnish clues that are used to infer the meaning and to decide on the significance of a bodily symptom, thereby influencing how intense and long-lasting the symptom will be. As a trait, it could be learned in childhood through observation of parents, teachers, or peers."

"The concept of somatic amplification is useful in understanding how symptoms are perceived in chronic pain and other somatoform disorders. In our study, we found that the somatosensory amplification and the rates of dysthymic disorder and generalized anxiety disorder were higher in the vitiligo and chronic urticaria group than control group. The concept of somatosensory amplification is new and only recently has been studied in more detail.

Symptoms are intensified when they are attributed to a serious disease rather than to more benign causes. Stigmatization and disfigurement in vitiligo and chronic urticaria can cause anxiety and secondary counter-dependency in patients with chronic pain. The concept of somatosensory amplification is useful in understanding how symptoms are perceived in chronic pain and other somatoform disorders. In our study, we found that the somatosensory amplification and the rates of dysthymic disorder and generalized anxiety disorder were higher in the vitiligo and chronic urticaria group than control group. The concept of somatosensory amplification is new and only recently has been studied in more detail.

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