

## CULTURE BOUND SYNDROMES IN MENTAL HEALTH

Ref: ([https://en.wikipedia.org/wiki/Culture-bound\\_syndrome#DSM-5\\_list](https://en.wikipedia.org/wiki/Culture-bound_syndrome#DSM-5_list))

The definition and expression of mental illness varies around the world. Although presentations conforming to the major DSM-V categories can be found throughout the world, the particular symptoms, course, and social response are very often influenced by local cultural factors. In contrast, culture-bound syndromes are generally limited to specific societies or culture area and are localised, folk, diagnostic categories that frame coherent meanings for certain repetitive, patterned, and troubling sets of experiences and observations. Disorders featuring similar behaviours are listed together. Not all of them are considered pathological in their society of origin, and may be seen as "idioms of distress," a way of communicating distress in a way which is culturally understood and, to varying degrees, accepted DSM-5 lists some of the following culture-bound syndromes as "Cultural Concepts of Distress" but other concepts are not included in DSM-5 (APA 2013d). While the illnesses vary within and between cultures, syndromes with very similar symptoms are listed together.

Wikipedia links have been included in some entries for easy access, and may connect to scholarly sources.

<p><b>Amok</b></p>	<p><b>Amok</b> (Malaysia) also known as <b>Cafard</b> or <b>Cathard</b> (Laos, Polynesia, the Philippines) is a dissociative episode featuring a period of brooding followed by an outburst of aggressive, violent or homicidal behaviour aimed at people and objects.</p> <p><b>Amok</b> typically occurs in males aged between 20 and 45 years who have experienced a loss of social status or a major life change. The episode is often precipitated by a perceived slight or insult and is generally accompanied by persecutory ideas, automatism, amnesia or exhaustion. After the episode has occurred, the individual returns to their premorbid state.</p> <p>Episodes of <b>amok</b> are now rare and generally confined to individuals living in rural areas.</p>
<p><b>Brain fag</b></p>	<p><b>Brain fag or brain fog</b> (West Africa) describes a syndrome typically affecting high school or college students pursuing a Western-style education. Symptoms often begin after an intensive period of intellectual activity and include watery or dry eyes, dizziness, blurring of vision, difficulty concentrating or remembering, pain or feelings of pressure in the head or neck, fatigue and difficulty sleeping, shaking hands, rapid heartbeat, crawling sensations under the skin, feelings of weakness and depression.</p> <p>Although the DSM-IV specifies West Africa as the origin of <b>brain fag</b>, the term and syndrome occur in many sub-Saharan areas.</p>

<p><b>Dhat</b></p>	<p><b>Dhat</b> (India), also known as <b>Jiryan</b> (India) or <b>Sukra Prameha</b> (Sri Lanka) is defined as, "vague somatic symptoms of fatigue, weakness, anxiety, loss of appetite, guilt and sexual dysfunction attributed by the patient to loss of semen in nocturnal emissions, through urine and masturbation."</p> <p>Although it is rare, women have experienced similar symptoms to <b>dhat</b>, related to whitish vaginal discharge. The general psychosomatic symptoms are very similar.</p>
<p><b>Shen-k'uei</b></p>	<p><b>Shen-k'uei</b> (China, Taiwan), a Chinese syndrome, has similar symptoms to <b>dhat</b>. <b>Shen-k'uei</b> is described as, "a form of sexual neurosis associated with excessive semen loss due to frequent intercourse, masturbation, nocturnal emission or passing of white turbid urine which is believed to contain semen. Young people who think they might be suffering from it become anxious and panicky, and complain of somatic symptoms (with no organic cause) such as dizziness, backache, fatigue, weakness, insomnia, frequent dreams and physical thinness. Some believe that women can steal a man's vital energy through sexual intercourse and this loss of semen leads to the disease. Furthermore, it is also believed that semen loss has the potential to lead to an imbalance in chi, promoting weakness.</p> <p>Semen-loss anxiety is also known in the West, although it is largely considered to be a thing of the past, possibly as a consequence of increased industrialisation and urbanisation. The Victorians were well known for being almost obsessive about masturbation and nocturnal emissions, blaming these behaviours for wasting away, paleness, cold sweats, hairy palms, tremors, exhaustion, muscle weakness, pimples, and a variety of other symptoms.</p>
<p><b>Hwa-byung</b></p>	<p><b>Hwa-byung also known as ul-hwa-byeong or wool-hwa-byung</b> (Korea) literally translates to "fire illness", and is believed to be caused by a build-up of unresolved anger (known as <i>haan</i> or "everlasting woe") that disturbs the balance of the five bodily elements. This anger is often experienced as a heavy mass that pushes up from the abdomen into the chest.</p> <p><b>Hwa-byung</b> typically occurs in middle-aged Korean women with limited education from low socio-economic rural areas. Affected individuals generally operate in a traditional family structure and the triggering cause is generally a family-related event, such as spousal infidelity or conflict with in-laws.</p> <p>Symptoms include anxiety, pervasive depression, obsessions and compulsions, anorexia and feelings of hatred, shame, paranoia, fearfulness, destructive impulses, irritability, anxiety and absent mindedness. Sufferers also complain of sleeplessness, dizziness, headaches, indigestion, sexual dysfunction, intolerance to heat, dry mouth, hot and cold flushes, weakness, heart palpitations and blurred vision.</p>

	Western diagnoses include major depression, anxiety disorders such as phobias, generalised anxiety and obsessive-compulsive disorder, and somatisation disorders.
<b>Koro</b>	<p><b>Koro</b> (Malaysia), also known as <b>Shuk yang</b> or <b>shook yong</b> or <b>suo yang</b> (China); or <b>Jinjinia bemar</b> (Assam); or <b>Rok-joo</b> (Thailand); or <b>Suudu</b> (Tamil, India) is one of the better known culture-bound disorders in which the affected individual has the overwhelming belief that their genitalia is receding into their body, possibly causing death. Afflicted persons may resort to clamps, ties, pegs or hooks to keep the genitals from fully receding, sometimes resulting in damage to the organs.</p> <p><b>Koro</b> more commonly affects males and is sometimes believed to be caused by sexual behaviours such as masturbation or sex outside of marriage that are thought to result in an imbalance of the male/female principle (yin and yang). Epidemics of <b>koro</b> have been also reported and may be a kind of mass hysteria.</p> <p>Similar syndromes have been reported in other cultures: for example, in the Guangdong region in China, it is believed that a fox spirit can steal penises, while perceptions of genital shrinkage are often ascribed to sorcerers or black magic in regions of Africa.</p>
<b>Saora</b>	<p><b>Saora</b> (Southeastern India), also known as <b>Shenjing Shuairuo</b> (Chinese) is used to describe a syndrome experienced by young men and women in India's Saora tribe. It has features of a dissociative or conversion disorder and includes elements of depression and anxiety disorders, such as physical and mental fatigue, dizziness, headaches, gastrointestinal problems, difficulty concentrating, sleep disturbance, memory loss, sexual dysfunction, irritability and excitability. Affected individuals exhibit memory loss, fainting and inappropriate crying or laughing. In addition, sufferers claim to experience repeated insect bites when no insects are present.</p> <p>Tribe members often attribute these behaviours to the actions of supernatural beings who want to marry the afflicted persons; however, this syndrome may occur in response to social pressure to conform to a certain way of life.</p>
<b>Qi-gong</b>	<p><b>Qi-gong Psychotic Reaction</b> (China) also known as <b>Qi-gong Deviation Syndrome</b> is a time-limited episode lasting between two and four weeks that is characterised by dissociative, paranoid and other psychotic and non-psychotic symptoms that occur after participation in the Chinese method of meditation known as Qi-gong.</p> <p>Symptoms may include headaches, dizziness or disorientation, strange sensations in the lower abdomen (the</p>

	Dan-Tian point), hypochondriasis, anxiety, sadness, feelings of being out of control and visual and auditory hallucinations.
<b>Shin-byung</b>	<b>Shin-byung</b> (Korean) is characterised by anxiety and somatic complaints, such as general weakness, dizziness, fear, loss of appetite, insomnia and gastrointestinal problems. It is attributed to possession by ancestral spirits.
<b>Zar</b>	<b>Zar</b> (North African and Middle Eastern societies) is a syndrome where an individual believes they have been possessed by a spirit. It is characterised by dissociative episodes when the affected individual shouts, laughs, weeps, sings or hits their head on the wall. They may also become apathetic, withdrawn and unable to carry out daily tasks.
<b>Old Hag Syndrome</b>	<b>Old Hag Syndrome</b> is relatively common across a number of cultures. It is believed that a "hag" (witch or supernatural being) has sat on the affected person's chest as they slept. The person experiences an inability to move, feelings of pressure on the chest and difficulty breathing. They may see red eyes or feel feet or fingers. They may also hear the hag breathing. Visitations from the hag tend to cross multiple generations in a family.  A modern version of the <b>Old Hag Syndrome</b> may be found in some alien abduction stories, which feature the same general themes.
<b>P'a Leng</b>	<b>P'a Leng (Wind Illness)</b> (China), also known as <b>Wei Han Zheng</b> (Singapore) is a fear that wind or cold will result in a loss of yang and imbalance of the body. The affected person becomes obsessed with being warm, and may wear winter clothing in the middle of summer.

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