



Review

Post-bereavement hallucinatory experiences: A critical overview of population and clinical studies



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ABSTRACT

Background: Removal of the "bereavement exclusion" criterion for major depression and proposed research criteria for persistent complex bereavement disorder in DSM-V pose new compelling issues regarding the adequacy of current nosographical boundaries. Post-bereavement hallucinatory experiences (PBHE) are abnormal sensory experiences that are frequently reported by bereaved individuals without a history of mental disorder. Given current uncertainty over the continuum of psychotic experiences in the general population, whether or not they should be considered pathological remains unclear.

Methods: In order to systemize available knowledge, we reviewed the literature describing general population and clinical studies on PBHEs. Given the relatively low number of articles, all peer-reviewed, published studies in English were included. No study characteristics or publication date restrictions were imposed.

Results: Overall, evidence suggests a strikingly high prevalence of PBHEs – ranging from 30% to 60% – among widowed subjects, giving consistence and legitimacy to these phenomena.

Limitations: Whereas general population studies had adequate sample size numbers, all studies in the bereaved population had a very small number of subjects. No consensus for method of evaluation exists in the literature, with some studies using a free interview method and others using semi-structured interviews.

Conclusions: The available literature appears to support an elevated frequency of PBHEs in bereaved individuals, but further research is needed to increase the reliability of these findings and refine the boundaries between physiological and pathological experiences.

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1. Introduction

The recently published fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) eliminated the “Bereavement Exclusion” criterion of Major Depression. At the same time the “trauma- and stressor-related disorders” section, whose validity has long been sustained (Gershuny and Thayer, 1999; Friedman et al., 2011), was introduced. The diagnosis of “persistent complex bereavement disorder” characterized by severe and persistent grief and mourning reactions, is listed within the subsection of “conditions for further study”. Associated features supporting diagnosis are “hallucinations of the deceased’s presence (e.g., seeing the deceased sitting in his or her favorite chair)” (APA, 2013). The prevalence of persistent complex bereavement disorder is estimated approximately around 2.4–4.8% (APA, 2013). Only some of the individuals with this disorder are reported to have hallucinatory experiences, suggesting a far lower prevalence for this phenomenon. Post-bereavement hallucinatory experiences (PBHE) are heterogeneously described and similar phenomena frequently occur outside the context of abnormal grief reactions; given the uncertain boundary between physiology and pathology, shared with all abnormal perceptual experiences, PBHEs deserve a careful and detailed inquiry.

The term bereavement generally refers to the state of being deprived of something, but it is commonly used to describe a period of mourning related to the loss of a close relative or a friend. While grief has recently received growing attention (Naef et al., 2013), the perceptual experience of the deceased during and after bereavement still remains largely unexplored. This phenomenon, known under different names such as “post-bereavement hallucination”, “grief hallucination”, “hallucination of widowhood”, includes a heterogeneous group of sensory deceptions and thought distortions occurring in the context of grief over the loss of a spouse or other loved ones. The expression “hallucinatory experiences” – although perhaps not itself comprehensive of all post-bereavement abnormal experiences – instead of the term “hallucination” is preferentially used throughout the present article.

Several cases are described in the literature of patients whose visual sensory deprivation predisposed to hallucinatory experiences as a symptom of grief reaction (Earnest, 1950; Alroe and McIntyre, 1983; Adair and Keshavan, 1988; Schneck, 1989, 1990). Few cases of pathologic grief, accompanied by hallucinatory experiences in the absence of any sensory impairment, are reported (Wells, 1983; Baethge, 2002; Gadit, 2011). Some studies suggest that these experiences are also common in the post-bereavement period of otherwise healthy subjects (Rees, 1971; Grimby, 1993; Olson et al., 1985). Nonetheless, grief hallucinatory phenomena have been poorly systematically investigated to date, and little is known about their epidemiological, psychopathological, and

neurobiological features. Therefore, it seems useful to review known prevalence rates and clearly define associated features (i.e. subjective distress, co-existence of other signs and symptoms of mental disorder) to clarify the standing of these phenomena along the physiology– pathology continuum.

2. Methods

Keyword title and abstract information were used to identify published studies through PubMed and Scopus databases. Various combinations of the following terms were used: “hallucination”, OR “hallucinatory experiences”, OR “illusions”, OR “felt presence”, AND “bereavement”, OR “grief”, or “widowhood”. Related searches were carried out using only the terms “bereavement” and “grief” and the obtained articles were manually searched for the presence of relevant data on PBHEs. Additionally, to reduce the likelihood of missing published data, all references from reviewed papers, book chapters, and other relevant articles were hand searched and consulted to identify studies that may have been missed through the database search. Studies published in non-peer-reviewed journals and those in languages other than English were excluded. Given the relatively low number of articles, all peer-reviewed, published studies in English were included. No study characteristics or publication date restrictions were imposed. Relevant methodological issues were extensively addressed (see Section 4). A comprehensive review of studies containing experimental data on PBHE is reported in Tables 1 and 2.

3. Results

3.1. Epidemiology of PBHEs in the general population

Prevalence rates found across several studies can be examined in Tables 1 and 2. Older studies, conducted among the general population between the end of the 19th century and the first half of the 20th century suggested the existence of the phenomenon beyond isolated descriptions and case reports (Sidgwick et al., 1894; West, 1948). Data are indirectly derived from articles referring to “realistic human phantasms of dead persons” as a sub-category of hallucinatory experiences in the general population. Percentages of 13.4% and 9% were found in the studies by Sidgwick and West respectively, whereas percentages of hallucinatory experiences taken as a whole fell around 10% and 14%. No data are available on the “bereavement status” of subjects included in the samples studied. The same questionnaire used by Sidgwick and West was later proposed by Palmer and Dennis to a college community: 17% of the 300 students interviewed reported the presence of a deceased person (Palmer and Dennis, 1974). The absence

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