Case Report

Incubus Syndrome as precursor of Schizophrenia

Masoud Amin1, Moazzame Mohammadi1, Reza Bidaki1

1 Rafsanjan University of Medical sciences, Rafsanjan, Iran
Corresponding Author: Reza Bidaki; E-mail: Reza.Bidaki111@Gmail.com

Abstract

Incubus syndrome is a rare disorder which has very restricted case reports. It is a type of erotomania that is in group of delusional disorders. Case Presentation: we intend introduce 23 years-old rural female student patient living in dormitory far from her family who was referred with bizarre delusion and behaviors. Results: Recognition of the precursor syndromes can aid psychiatrists to detect early symptoms of schizophrenia that, if cured at this stage, can cause to a more favorable long-term prognosis. Conclusio: It suggests that Incubus Syndrome can consider as precursor of Schizophrenia.

Keywords: Erotomania; Incubus syndrome; Precursor; Schizophrenia

Introduction

Incubus syndrome or demonic lover is a term to describe patients suffering from the fixed belief that they have been sexually approached nightly by an unseen lover (1). It is a type of the secondary erotomania, was described as the delusional belief -“memory” of an imposed raped by an imaginary lover (2-5). Schizophrenia is a chronic, debilitating psychotic mental disorder that affects about 1 percent of general population. It is now believed that there is combination between multiple genetic bases and environmental factors (6). Its symptoms generally begin in late adolescence or early adulthood and usually continue throughout life (7). Schizophrenia may demonstrate several precursor symptoms at first such as kleptomania, OCD, eating disorder, somatization disorder and etc (8). We intend suggest Incubus syndrome as a precursor and prodromal for schizophrenia. We didn't find it in previous reports.

Case Presentation

Here we have a 23 years-old rural single female student living in dormitory far from her family who was referred by a General physician in university with bizarre delusion and behaviors. She was entering other students' rooms in dormitory and tried to arrest a man entering nightly to girls dormitory for sexual intercourse with them (stalking and fixed false belief), and to prove her delusion, she hang a wire on the door of rooms. There was a potential risk for violent behavior by patient. She was asleep at night and lived lonely in dormitory. She had obsession with this thought. In interview, She was guarded and non-cooperative, depressed mood, tense, suspicious, poor insight, constricted affect. She was a paranoid patient that it was probable that we lie in her delusional system. She hadn't sexual experience. Her parents were low educated and lower limit of normal IQ. The parents hadn't history for psychiatric or organic disorders. She was treated as Incubus Syndrome by antipsychotics, anti-depressant and Electro convulsive therapy. We prescribed her; Tablet. Risperidone 2mg at night ,Tablet. Citalopram 20 mg/daily and Tablet. Clonazepam 1mg at night. But she refuse of drug consumption and she was regressed. Legal problems in university and even out of it were considerable. We were obligated for forced admission. It is considered six sessions Electro convulsive therapy for her because poor drug compliance. Developmental delay and problematic delivery were not found. Brain Magnetic resonance and Routin lab tests were normal. After 2 weeks, the symptoms were resolved significantly and she was discharged, she discontinued her treatment (She was very guard and resistant in treatment) and in a one year follow up she showed auditory and visual hallucinations, negative symptoms, bizarre symptoms, psychosocial regression (leaving college due to inability of studying and disturbance for other students in dormitory) and inability of normal functions which resulted diagnosis of Schizophrenia. She withdrawn academy and she wasn't able to keep on education. In fact Incubus Syndrome was a precursor for Schizophrenia.

In 1980, It is reported a woman diagnosed erotomania. At that time, she had been followed for nearly 8 years that diagnosis was established (2).
Discussion

Incubus syndrome is a rare disorder which has very limited case reports. It is a type of erotomania that is in group of delusional disorders. By searching reliable, credible and well known data bases such as PubMed we believe that it is the first report of Schizophrenia which presented with Incubus syndrome at early stages. Since both delusional disorder and Schizophrenia are both related to dopamine tract malfunction (8) it seems to be the best explanation for that. In psychiatry resources, it is explained some precursors for schizophrenia. Precursors are include: Somatization disorder, kleptomania, anorexia nervosa, Obsessive-Compulsive disorder. But Incubus syndrome isn't been suggested in onset of schizophrenia. Of course this statement maybe a unknown word for some of psychiatrists. We tried find history of love failure , but she didn't say it. We are believed that onset of illness with this disorder will worth the prognosis. There wasn’t a considerable gap between the appearance of symptoms and the diagnosis of schizophrenia in this case. First episode of schizophrenia is nearly in 3th decades of age in women .It maybe suggest that onset of schizophrenia with Erotomania or Incubus syndrome may advance onset of schizophrenia. In Erotomania , individual has a delusional belief that a person of higher socio-economic status falls in love and makes amorous advances towards him/her (9). But in our study, patient didn't mention a higher social level person and amorous was toward other sisters . In previous study , It was reviewed the studies about Erotomania that it was indicated more prevalent in patients with developmental disabilities (10). Regression in university achievement, job or other intellectual functioning has been known to be a precursor signs in schizophrenia since Bleuler’s descriptions (11-13). Progression of psychotic symptom in our case cause that she can't keep education, too. Recognition in the precursor syndromes can help psychiatrists to detect early symptoms of schizophrenia that, if cured at this stage, can cause to a more favorable long-term prognosis. The final goal is to aid prevent people at risk from becoming schizophrenia.

Conclusion

It suggests that Incubus Syndrome can consider as precursor of Schizophrenia.

References