



TO STUDY TEMPERAMENT AND CHARACTER TRAITS IN PATIENTS WITH BIPOLAR DISORDER

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ABSTRACT **Background-** Personality and character traits are important features of an individual which makes oneself a unique person. But some factors in personality can make someone to more vulnerable for psychiatric illnesses.

Methods: we compare personality and character traits in 30 patients diagnosed with bipolar affective illness with 30 normal healthy individuals. After taking informed consent demographic data was collected, on which we applied young's mania rating scale and Temperament and Character Inventory (TCI) on both the groups.

Results: Bipolar patients scored statistically higher than the healthy individuals on novelty seeking, harm avoidance and self-transcendence and lower on self-directedness and cooperativeness.

Conclusion: Overall we found that healthy individual group has better personality profile in comparison with bipolar manic group. These findings suggest that personality, mediates someone to the comorbidity phenomena in bipolar disorder.

KEYWORDS : Bipolar Affective Illness, Personality, Character

INTRODUCTION-

Personality is dynamic organization in someone's psychophysical organization which determines the unique adjustment in the environment. Premorbid personality in bipolar affective disorder as in other psychiatric illness is an important predictor for disease course, severity of symptoms, adherence to medications and prognosis.

When we go through the history in 1976 kraepelin stated in his book about manic depressive insanity and paranoia that personality can be considered as vulnerable factor for bipolar affective disorder [1]. Staner et al. 1998 said that bipolar affective disorder and specific personality traits shares same genetic predisposition [2].

Cloninger in his study- a guide to its development and use of Temperament and Character Inventory said that Temperament and Character Inventory (TCI) is based on the concept that personality is basically dynamic interaction between four temperament and three character traits [3].

Temperament traits (novelty seeking, harm avoidance, reward dependence and persistence) are manifested early in life and continue to whole life and they follow basic emotional response on the other hand characteristic traits (self-directedness, cooperativeness and self-transcendence) focus on self and personal relations which govern through supervisory cognitive process that maintain throughout life.

In compare to healthy individuals bipolar patients achieve higher scores on novelty seeking [4, 6], harm avoidance [4,5] and reward dependence[5], and lower scores on persistence[5, 6] and self-directedness [7].

MATERIAL AND METHOD-

The study was conducted in SMS medical college, Jaipur from 15 July 2019 to 15 September 2019. After taking the ethical clearance for study from SMS ethical committee, we took 60 patients in which 30 patients were of bipolar affective disorder (with the young mania score <9) and 30 healthy individuals. After taking written consent we obtained socio demographic data then we applied young mania severity scale to assess the severity of illness. Personality traits were assessed using the Temperament and Character Inventory (TCI).

Inclusion Criteria for Bipolar patients-

1. Patient diagnosed as bipolar affective illness (from ICD-10).
2. Literate enough to give written consent and understand the questionnaire.
3. Age range of 18-50 years.
4. Only male sex.
5. Having score below 9 on the Young Mania Rating Scale.

Exclusion criteria for Bipolar patients:-

1. History suggesting neurological disorder, major physical illness,

mental retardation, substance abuse.

2. Any co-morbid psychiatric disorder other than Bipolar Affective Disorder (Mania).

Inclusion criteria for normal healthy individual group:-

1. Age range 18-50 years.
2. Male sex.
3. Literate enough to give written consent and understand the questionnaire.
4. No history suggesting of any psychiatric, neurological disorder, mental retardation, substance abuse and alcohol abuse.

Tools-

1. Informed consent.
2. Socio demographic profile.
3. Young mania rating scale- most commonly used 11 items scale for rating severity of symptoms of mania. The points on scale stands for 0-10= absent, 11-20= mild, 21-32- moderate, 33-44= severe, 45-55= vary severe [8].
4. Temperament and Character Inventory TCI- It is a self-report questionnaire composed of 240 true-false items designed to measure individual differences on 7 dimensions of temperament and character. The psychometric properties of the TCI have been extensively evaluated in normative and clinical samples [3].

Statistics- was applied using SPSS version 23. Analysis of covariance (ANCOVA) with age and gender as covariates was used to compare the mean TCI dimension scores between bipolar patients and healthy individuals. Spearman correlations or partial correlations were used to examine the bivariate associations between the TCI personality traits and specific clinical characteristics of the subjects.

RESULTS-

Demographic details-In the demographic details shows that all male subjects are in the age range of 18 to 45 years constitute the sample wherever their education up to matric (50% bipolar group- & 53.33% normal group). Majority of the cases were employed (50% bipolar group- & 77.67% normal group) and married (50% bipolar group & 63.33% normal group), belonging to semi urban area (77.67% in bipolar group & 63.33% normal group). Many subjects have monthly family income below rupees 5000(63.33% in manic group & 77.67% in normal group).

Table 1

Dimensions	Bipolar patients (n-30)	Healthy individuals (n-30)	P value
	Mean ± SD	Mean ± SD	
Temperament traits			
Novelty seeking	22.3 ±5.5	16.8 ±4.7	<0.001
Harm avoidance	18.8 ±7.7	10.4 ±6.5	<0.001

Reward dependence	16.8 ±4.0	17.1 ±4.4	0.4
Persistence	4.9 ±2.5	5.7 ±3.1	0.7
Character traits			
Self-directedness	24.5 ±8.1	38.8 ±4.6	<0.001
Cooperativeness	32.2 ±7.8	36.6 ±5.4	<0.001
Self-transcendence	21.2 ±7.1	12.8 ±6.4	<0.001

ANCOVA showed that bipolar patients scored significantly higher on novelty seeking ($p < 0.001$), harm avoidance ($p < 0.001$) and self-transcendence ($p < 0.001$) than healthy individuals. The bipolar patients scored significantly lower on self-directedness ($p < 0.001$) and cooperativeness ($p < 0.001$). Bipolar patients did not differ significantly from healthy individuals on reward dependence ($p = 0.4$) and persistence ($p = 0.7$). The means and S.D. for each dimension score of these groups are displayed in Table 1.

DISCUSSION-

The present study compares the personality traits between patients suffering from bipolar affective disorder with normal healthy individuals. Kraepelin in his book on Manic-Depressive Insanity and Paranoia, 1976 said that temperament in these patients is a rudimentary form of full blown illness [1]. Cloninger in his article on The Temperament and Character Inventory (TCI)- a guide to its development and use, novelty seeking was explained further as exploratory, curious, impulsive, extravagant, enthusiastic [3].

The bipolar patients scored more on novelty seeking and harm avoidance. In a study on comparison of Tridimensional Personality Questionnaire dimensions in bipolar patients and unipolar depression, young et al, 1995, described that harm avoidance found more in unipolar and bipolar affective illness than in normal group. On the other hand novelty seeking was found to be high in bipolar affective illness than in unipolar depression group and normal group. Finally he concluded that harm avoidance might be associated with mood disorders while novelty seeking is suggestive more toward bipolarity [9].

In another study by Engstrom C et al. on temperament and character in bipolar affective illness concluded that bipolar patients were significantly higher in harm avoidance than controls [10].

In the character traits bipolar patients presented lower self-directedness and cooperativeness and higher self-transcendence than healthy individuals. In a study conducted by Evans et al, 2005 concluded that bipolar patients differ from healthy individuals in self-directedness [11]. The study says that there was higher self-transcendence scores in bipolar patients compared with healthy individuals. Higher self-transcendence might be considered an adaptive phenomenon in the patients suffering from bipolar affective disorder to deal the illness.

CONCLUSION-

In compare to bipolar patient's normal healthy individuals found better personality profile which makes them more cooperative and well-adjusted in the society. Other than factors like positive family history of bipolar affective illness, substance use we can also consider temperament and character traits as future predictor of psychiatric illness hence present study enhances our understanding for association between personality and psychiatric illnesses.

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