

# A Comparative Personality Profile Study Between Bipolar-affective disorders (Mania) and Normal control group.

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## Abstract

**Introduction:** Personality is the important core feature and identification of an individual. Some factors in personality may be vulnerable for psychiatric illness.

**Objective:** To compare Personality profile of Bipolar Affective Disorders with Normal control group.

**Method:** 30 male patients diagnosed as Bipolar affective disorder (mania) and 30 normal male were included in the study, with the aim to determine the comparison of personality characteristic of Bipolar affective disorder (Mania) and Normal control group. Each individual was given the informed consent response than collected Socio demographic and Clinical data sheet after that Young mania rating scale and 16 personality factor was applied for data collection.

**Result:** Present study explore that the Manic (BAD) groups of subject differ significantly on all the factors except Q4 from normal controls. Higher mean scores on factor Q4 means that manic (BAD) are tense, restless, fretful & driven, extremely high tension level was disrupt school and work performance.

**Conclusion:** : Both the groups differentiated significantly on all the factors except Q4. The mean score obtained by normal control has higher in comparison of BAD-manic category.

**Keywords:** Personality, Comparison, Normal & Control group

## INTRODUCTION

Personality constitutes numerous type of different trait and everyone has the distinct bound. These traits determine our behavior, temperament and overall personality in normal cases but in morbidity or abnormal cases, some traits have in wrong bounding or due to impact of illness such thing happen specially in bipolar disorder<sup>1</sup>. A long history of bipolar disorder has been proven the role of personality and many researches focus on unipolar depression and their result said, personality traits correlate with frequent relapse, severity of symptoms and worse outcome specially those patients diagnosed with depression, neuroticism and obsession, they have poor outcome, decreased social adjustment and increased chronicity<sup>2,3</sup>.

Numbers of studies found the significant association between component of personality and bipolar disorder. Temperament and Character Inventory (TCI) applied in many research and validate above statement. Theoretical reviews on TCI explain personality is the dynamic interaction between four temperament trait (like-novelty seeking, harm avoidance, reward dependence and persistence) and three characteristic traits (self-directedness, cooperativeness and self-transcendence). Temperament traits are manifested early in life and continue to whole life and they follow basic emotional response on the other hand characteristic traits focus on self and personal relations which govern through supervisory cognitive process that maintain throughout life<sup>4,5</sup>. Comparative research on TCA explore that

bipolar patients scored high on novelty seeking<sup>6,7</sup>, reward dependence<sup>8</sup>, and harm avoidance<sup>6,8,9</sup> and low scored on persistence<sup>7</sup> and self-directedness<sup>10,9</sup> in comparison with normal control group.

### **MATERIAL AND METHOD**

Thirty male patients diagnosed as BAD (Mania) constituted the study sample. Young Mania Rating Scale was applied on them to quantify the psychopathology and only those cases were selected, who scored below 9 on the scale. The patients sample was collected from the Ranchi Institute of Neuro-psychiatry and allied science, Ranchi. Thirty male normal persons also constituted the sample of 'normal group', who were taken from nearby area of Kanke, Ranchi and administered 16 PF for making a personality profile of BAD Manic. Purposive sampling was applied in data collection.

#### **Inclusion Criteria for psychiatry group:-**

1. Patient diagnosed as BAD (Mania) (According to DCR or ICD-10).
2. Must have formal education up to 5<sup>th</sup> std.
3. Age range of 18-50 years.
4. Only male sex.
5. Having score below 9 on the Young Mania Rating Scale.
6. Give informed consent

#### **Exclusion criteria for psychiatric group:-**

1. Uncooperative patients.
2. History suggesting neurological disorder, major physical illness, mental retardation, substance abuse.
3. Any co-morbid psychiatric disorder other than BAD (Mania).

#### **Inclusion criteria for normal group:-**

1. Age range 18-50 years.
2. Only male sex.
3. Educated at least up to 5<sup>th</sup> std.
4. Give informed consent
5. No history suggesting of any psychiatric, neurological disorder, mental retardation, substance abuse and alcohol abuse.

#### **Tools:-**

1. Informed consent.
2. Socio- demographic detail and clinical data sheet. This data sheet consists of detail points regarding Socio-demographic and clinical details.
3. Young mania rating scale:- The YMRS, developed by R.C.Young(et al.) is probably the most frequently utilized rating scale to assess manic symptoms. The scale has 11 items and is based upon the patient's subjective report of his clinical condition over the previous 48 hours. The cut off points are 0-10= absent, 11-20= mild, 21-32- moderate, 33-44= severe, 45-55= vary severe, etc.
4. 16 Personality Factor: - 16 Personality factor questionnaires (1949) were used in the present study to assess the personality traits. The Sixteen Personality Factor Questionnaire was developed by R.B.Cattell & H.W.Eber, it is available in different forms A, B, C, D. The test was designed to assess personality traits with individual aged 18 and above. The each form of the test measures 16 primary factors of the personality. They are fully independent of each other.

**Procedure:** - After detailed interview of patients and information gathered by case record file. Socio- demographic and clinical data sheet was filled-up as routinely basis. There after Young Mania Rating Scale was administered for screening purpose and only those Bipolar Affective Disorder (Mania) patients were selected, who scored below 9 on the scale and fulfilled the inclusion & exclusion criteria. Informed consent taken with their detail socio-demographic profile and Finally 16 Personality Factor Questionnaire administered on each case individual according to convenience of the patient. Similarly, normal that fulfilled inclusion and exclusion criteria were also interviewed for informed consent and socio- demographic information was collected and 16 PF test administered.

**Statistical Analysis:** - Data was analyzed by mean, SD and 'T' ratio for comparison between normal control groups. The percentage (%) was used to prepare the personality profile of Mania.

The data of 16 PF was categorized into low, moderate, average and high category.

**RESULT**

Present study has been conducted on a sample of 30 Bipolar Affective Disorder (Manic) male patients and 30 normal male control groups. The patients sample was taken from the Ranchi Institute of Neuro- Psychiatry and Allied Sciences, Ranchi. The 30 male normal persons were taken from nearby area of Kanke, Ranchi. Sample characteristic is given in the table wherever group-I is Bipolar group and group-II is normal control group.

**Table no. 1: Showing Demographic Variable of both groups**

		Group -I (N = 30)		Group-II (N = 30)	
		N	%	N	%
Age Range	18-25 yrs	17	56.66	19	63.33
	25-45 yrs	13	43.33	11	36.67
Sex	Male	30	100	30	100
Marital Status	Married	19	63.33	23	76.67
	Unmarried	11	36.67	7	23.33
Education	Till 5 <sup>th</sup> std	6	20.00	3	10.00
	8 <sup>th</sup> -9 <sup>th</sup> std	11	36.33	8	26.66
	Matric	12	40.00	16	53.33
	Intermediate	1	3.33	3	10.00
Occupation	Employed	15	50.00	19	63.33
	Unemployed	12	40.00	6	20.00
	Others	3	10	5	16.66
Residence	Rural	8	26.66	5	16.66
	Urban	5	16.6	6	20.00
	Semi urban	17	56.66	19	63.33
Monthly Family Income in Rs.	Below 5000	24	80.00	20	66.66
	5000 - 8000	5	16.66	7	23.33
	Above 8000	1	3.3	3	10.00

Above table shows that all male subjects are in the age range of 18 to 45 years constitute the sample wherever their education up to matric (40% bipolar group- & 53.33% normal group). Majority of the cases were employed (50% bipolar group- & 63.33% normal group) and married (63.33% bipolar group & 76.67% normal group), belonging to semi urban area (56.66% in bipolar group & 63.33% normal group). Many subjects have monthly family income below Rs. 5000(80% in manic group & 66.66% in normal group).

**Table no. 2: Comparison of personality profile of Bipolar- Affective Disorder (Mania) and normal individual.**

Personality Factor	Patient (Manic) Mean+SD	Normal Control Mean +SD	'T'	Significance
A	3.766+1.10	6.400+ 2.94	4.60	.00
B	3.633+1.51	5.500+1.88	4.24	.00
C	2+.89	6.6333+2.18	10.77	.00
E	4+1.26	5.2667+2.46	2.52	.05
F	3.033+.98	6.5667+2.20	8.08	.00
G	2.833+1.06	4.2667+2.11	3.33	.00
H	3.466+.80	6.8333+2.08	8.29	.00
I	3.666+1.01	5.1000+2.13	3.33	.00
L	3.133+1.23	7.066+2.25	8.42	.00
M	3.733+1.18	5.4000+1.90	4.09	.00
N	3.666+.97	7.4000+2.25	8.37	.00
O	4.333+.64	5.2333+2.22	2.22	.05
Q1	2.1+.91	6.2000+1.95	10.48	.00
Q2	3.333+1.38	6.1000+2.52	5.28	.00
Q3	2.733+.92	6.7667+2.17	9.37	.00
Q4	4.333+1.04	3.9000+2.42	.90	

Table 2 shows that both the group of normal and patients were compared on different areas of 16 PF test. In respect to Factor 'A' both the group differed significantly at .001 levels. Though the mean score of both groups were in the average range still the normal control exhibited comparatively higher score however higher score obtained by normal control suggests the normal control tend to be more emotionally expressive, ready to cooperate and able to adjust in different social situations. They were further found generous in personal relations less afraid of criticism. On the other hand patients group were found to be more rigid in their way of doing things and in their personal standers. Further they were comparatively found to more cool, skeptical in nature.

In respect to Factor 'B' the mean scores obtained by both the group found to differ significantly as normal control group seem to a fast learner and better cognitive interpretation of the world, and the other hand patients group scores comparatively low on Factor 'B' tends to reflect that they are slow in learning an have difficulties on literal interpretation of the world. Further the dullness simply represents the poor functioning to underline psychopathology.

In respect to Factor 'C' both the group differ significantly and normal control have been found to be more emotionally mature, stable, realistic about life, better ego strength in comparison to the patients group, the patients group showed low in frustration tolerance, neurotically fatigued.

In respect to Factor 'E' which studies, both the group differ significantly with normal control having higher mean score in comparison to patient group. The result shows the normal control comparatively more assertive, self assured and independent minded than patient group.

On factor 'F' the patient group was found to have significantly lower mean scores in comparison to normal control group. The lower score on Factor 'F' suggests that the patient group exhibit more pessimistic, sober, and spending time undue deliberation.

Comparison the groups in respect to Factor 'G' both the group differ significantly with comparatively higher score on normal control. The result suggests that the normal control have better sense of duty, persevering responsible and planful in nature.

In respect to Factor 'H' significant difference was found in both the groups. Low scores of the patient group show inferiority feelings and their disinterest in occupations with personal contacts. On the other hand normal control were found bold, ready to try new things spontaneous abundant in emotional responses.

In respect to Factor 'I' both the group differ significantly on the mean scores obtained by both of them. The normal controls were found to be emotionally sensitive, dependent, sometimes demanding on have an avoiding rough occupation.

In respect to Factor 'L' the normal control obtained significantly more mean scores in comparison to patient group. Higher scores on Factor 'L' suggest that normal controls were involved in their own egos and selfly opinioned and interested in internal, mental life. They are more cautions while working in a group setting.

In respect to Factor 'M' also the normal control obtained higher scores in comparison to patients group. The patients group tends to be anxious to do the right things, attentive to practical matters, and or sometimes responsive to the outer, rather than the inner world. And the other hand

normal control exhibited, certain characteristics like be unconventional, unconcerned over everyday matters, self-motivated, and imaginatively creative.

In respect to Factor 'N' both the groups differ significantly on own hand patient group were found to have natural warmth and a genuine liking for people on the other side normal control were polished experienced and more practical. They exhibited more diplomatic character in comparison to patient group.

In respect to Factor 'O' were again both the groups were found to differ significantly were does the patients were found to have matured. Non-anxious confidence in themselves and self-satisfied. The normal control tended to worry and feel anxious and guilt stricken over difficulties.

In respect to Factor 'Q1' the patients group were found to be compromising in new ideas. They were also more conservative in religion and existing political system and inclined to go along with tradition. On the other hand normal control tend to be interested in intellectual matters and to have doubts on fundamental issues, were also found to be more well informed, less inclined to moralize more inclined in real life and more tolerant of inconvenience and change.

In respect to Factor 'Q2' the normal control were found to be temperamentally independent, accustomed to going their own way, making decisions and lacking action on their own, in a way were found to be self-sufficient, resourceful, and mostly preferring own decisions in comparison to patients group.

In respect to Factor 'Q3' the patients group was found to be comparatively maladjusted and did not seem to be bothered about the social, conventional. On the other hand the normal control exhibited more self-respect and high regard to social reputation.

In respect to Factor 'Q4' the patients group exhibited restlessness results remaining inactive despite being fatigued. On the other hand normal control tended to be relaxed, composed and satisfied.

#### **DISCUSSION:**

The present study was carried out to compare personality trait of bipolar effective disorder (Manic) group of patient and normal controls.

The manic groups of subject differ significantly on the entire factor except Q4 from normal controls. Higher mean score on Factor 'Q4' means that manic (BAD) are tense, restless, fretful and driven, extremely high tension level was disrupt school and work performance.

Some of the striking findings like patients group reflecting on Factor 'A' were comparatively, reserved, detached and skeptical than the normal controls who do not go by the established understanding about the characteristics of the illness as, patients with manic features are expected to be outgoing likening people easy going and participating. This might be result of the patient's sample, which were in improved state and were near normal. In a way each stable patient showed more a normal profile on this given factor. Further, the patient groups of subject were found to have concrete thinking, being emotionally less stable, submissive often casual in their approach <sup>11</sup>, which is in the expected direction. On the other hand, they were also found to be sober, sky, conservative which is more a characteristics of the individual with neurotic and depressive features.

However the some can be explained on the basis of the fact that one's the patient is BAD (Manic) and starts improving the patient start exhibiting sign of anxiety as they regain insight and become reality oriented <sup>12</sup>, spend time speculating their course of future action.

Some of the interesting findings in terms of personality traits of individual with BAD- Manic were more practical, tough minded and careless rules, they have been also found to the anxious to do the right things. The findings of this study is supported by a number of studies, <sup>13,14</sup>, compared with healthy controls and the clinical group (mainly Manic Bipolars) appeared more neurotic and less frustration tolerant.

#### CONCLUSION:

On BAD (manic) patients group the maximum sample was found in low category except Q4, which shows the BAD (manic) are formal, aloof, concrete thinking, less intelligent, emotionally less stable, easily annoyed, easily led, accommodating, restrained, sober, sometime pessimistic, disregards rules, self indulgent, shy, timid and conservative group oriented.

Both the groups differentiated significantly on all the factors except Q4. The mean score obtained by normal control has higher in comparison of BAD-manic category. The normal control tend to be more emotionally expressive, ready to cooperate and able to adjust in different social situation, a fast learner and have better cognitive interpretation of the world. Patient group was tending to be slow in learning and have difficulties on literal interpretation, poor functioning due to underlying psychopathology. Normal was found to be emotional mature, stable, realistic, better sense of duty, responsible, planful have better ego-strength and patient group has low in frustration tolerance inferiority feeling, disinterest in occupation.

Overall finding suggest that normal has better personality profile in terms of adjustment and morbidity in comparison with bipolar manic group.

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