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KLINGSOR SYNDROME: A CASE REPORT

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ABSTRACT

A Case of genital self-mutilation under the effect of delusions and hallucinations is described. The Importance of liasion between surgical and psychiatric services is highlighted.

Key Words Genital self multilation, Schizophrenia.

Self-injurious behaviour(SIB) is observed in both psychotic and nonpsychotic individuals though the self-inflicted genital mutilation is usually associated with the psychotic disorders. Patients with command hallucinations,religious preoccupations, substance abuse and social isolation are the most vulnerable (Tobias et al.,1988).Following report elucidates such a case.

CASE REPORT

RS,A 25- year old unmarried male presented to the emergency services as he had severed off his penis with a knife. Patient reported of feeling no pain at that time and explained this act as carrying out the orders given to him by the goddess. The voice had assured him that by doing so his sins would be expiated and that he would attain sainthood. His family reported that he had disturbed sleep, a decline in work performance, increased talking, mainly religious in content and Disinhibited behaviour off and on for the past seven months. He had no past or family history of psychiatric illness.There was no past history of SIB or sexual deviation. Mental status examination revealed bizarre sexual and religious delusions and auditory hallucinations. The latter were accusatory as well as commanding in nature and mainly religious in content. A diagnosis of schizophrenia was made. He responded to the treatment with typical antipsychotics and is maintaining well.

DISCUSSION

The eponym Klingsor syndrome has been used to describe the act of gential self-mutilation associated with religious delusions (Schweitzer,1990). The other risk factors associated with genital self-mutilation include single males of 20-29 years of age.physical or sexual abuse, homosexual or transsexual tendencies,repudiation of male genitals and feeling of guilt for sexual offences (Martin and Gattaz,1991). Aboseif et al.(1993) in a series of 14 patients with genital self-mutilation reported that 65% were psychotic and 31% of this group made repeated attempts at genital self-mutilation. The degree of injury however,did not differ between the psychotic and non-psychotic patients.Such patients mostly present as surgical emergency before the psychiatric consultation is sought. Treatment though prolonged, the outcome is often better than is assumed.

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