

PSYCHOSOMATIC COMPLAINTS OF EAR, NOSE AND THROAT PATIENTS IN A NIGERIAN TEACHING HOSPITAL

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Somatic complaints of psychological origin are widespread in Nigeria. Though also found among normals, they are observed in varying degrees among different groups of mentally and physically ill especially among ear, nose and throat (E.N.T.) patients. To determine the significance of the level of manifestation of these symptoms among E.N.T. patients, fifty E.N.T. patients were compared with fifty neurotic patients by making use of the Enugu Somatization Scale. Sixty-nine medical out-patients and normals were also used as control groups. E.N.T. patients manifested these complaints significantly. The implications for the treatment of E.N.T. patients especially in Nigeria were stressed.

The ear-nose-throat (E.N.T.) areas of the body appear to participate very frequently in somatic manifestation of emotional disturbance. Rees (1964) showed that nasal vasomotor instability (vasomotor rhinitis) is most commonly a psychosomatic disorder. He stated further that in these patients there are found a variety of personality traits rated as unstable, very meek, very anxious, cyclothymic or hypochondriac. In some patients the precipitating cause of vasomotor attack is obscure. However, in other emotional factors as anxiety, tension, anger, hostility, humiliation, resentment, indignation, grief or even pleasurable excitement are responsible. Wolf, Holmes, Goodell and Wolf (1946) noted that emotion induced functional changes in the nose which took the form of either vasoconstriction or vasodilation with hyperaemia of the mucosa, turgescence of the erectile tissues of the nose and increased secretion of the mucosa. Recurrent ulcerative (aphthous) stomatitis which is attributed to virus or endocrine factors is also thought to be of psychogenic origin (Downton, 1971). Globus hystericus, a frequent syndrome among E.N.T. patients, has been shown to be due mainly to

emotional disturbance (Obiako, 1980; Obiako & Ebigbo, 1982). In fact, Pastor, Aldrick, Richards and Lindsay (1955) believed that the syndrome constitutes 90% psychosomatic and only 10% organic. Emotional upset is known to cause paraesthesia of pinna and the external auditory meatus which is often associated with headache. It does also cause tinnitus, psychosomatic deafness (Newby, 1951), laryngeal spasm, aphomia or even speech disorder (Moore & Abott, 1977).

From clinical observations in the E.N.T. clinic of the University of Nigeria Teaching Hospital, Enugu, it appeared that unusually high proportion of E.N.T. patients has one or the other form of somatic manifestation of emotional disturbance. Fear, anxiety, worry and depression seem to feature very frequently. The aim of this study, therefore, is to determine the extent of somatic complaints indicative of emotional disturbance among E.N.T. patients and to compare the findings with those of other patients and thereby determine how much more or less E.N.T. patients somatize.

METHOD

Subjects

50 ear-nose-throat patients were randomly selected from those attending the clinic. In cases where it was considered necessary, investigations such as X-rays, audiograms, urine analysis as well as blood investigations were conducted. The diagnosis was established and appropriate treatment instituted. Sixty-nine patients were also picked from among the patients attending the medical out-patient clinic. They had been examined by the physicians and necessary investigations conducted. Patients from the medical out-patient (M.O.P.) clinic were chosen because the results obtained from studying them could serve as an index of the emotional state of patients in general. The next group of patients to be studied were 50 neurotics from the psychiatric out-patient clinic of the same hospital. Investigations were completed and diagnosis established following the International Classification of Diseases (I.C.D.).

Materials and Methods

Subjects were administered the Enugu Somatization Scale (Ebigbo, 1981). The Enugu Somatization Scale is a screening scale

of culture bound somatic complaints. The psychosomatic complaints contained in the Enugu Somatization Scale have been reported to be found even among normal individuals. The only difference between normals and the mentally ill is in the

Table 1

Percentages showing Diagnostic Categories of ENT, MOP and Neurotic Patients

Diagnosis	ENT N - 50	MOP N - 69	NP N - 50
Chronic suppurative			
otitis media	30	-	-
External Otitis	18	-	-
Deafness	8	-	-
Nasal Obstruction	6	-	-
Sinusitis	10	-	-
Laryngitis	6	-	-
Globus Hystericus	6	-	-
Foreign bodies	10	-	-
Laryngeal Cancer	2	-	-
Epistaxis	4	-	-
Malaria	-	38	-
Headache	-	7	-
Dyspepsia	-	3	-
Hypertension	-	13	-
Malabsorption Syndrome	-	4	-
Diabetes	-	10	-
Endocrine disorder	-	6	-
Neurological disorder	-	9	-
Insomnia	-	7	-
Anorexia	-	3	-
Anxiety	-	-	44
Neurotic depression	-	-	28
Mixed depression	-	-	20
Hysteria	-	-	6
Obsessive compulsive neurosis	-	-	2
Total	100	100	100

frequency of occurrence of such complaints (Ebigbo 1983, 1986; Ebigbo & Ihezue, 1982). Kumaraswamy and Ebigbo (1984) have indicated that these somatic complaints, found also among Indians, are culture specific idioms of distress linked to psychiatric disorders. Ayorinde (1977) maintained that these complaints are indicative of some unbearable psychological stress.

Table 2

Percentages Showing Occupations of ENT, MOP and Neurotic Patients

Occupation	ENT N - 50	MOP N - 69	NP N - 50
Students	36	17	30
Civil Servants	26	25	12
Pensioners	-	22	-
Housewives	2	10	10
Businessmen	-	3	4
Traders	10	-	4
Teachers	8	5	10
Farmers	2	4	6
Craftsmen	10	4	12
Applicants	2	7	8
Nurses	4	3	4
Total	100	100	100

The scores from these clinical groups were compared with the results got from 349 students from the Institute of Management and Technology, Enugu. In an earlier study (Ebigbo, 1983), these students were considered to be normal and acted as a control group to mentally ill patients. For the diagnosis and the occupation of the patients involved in the study see tables 1 and 2.

RESULTS

Of the three groups of patients under consideration, the E.N.T. patients were aged between 14 and 52 years. Their average

age was 24.62 years and the standard deviation was 8.55. The male-female ratio was 2 : 1 while the single-married ratio was 3 : 1. The emotionally disturbed patients were aged between 15 and 54 years. Their average age was 29.6 years with a standard deviation of 4.98. Lastly, the patients selected from the medical out-patient clinic were aged between 14 to 80 years. The percentages of positive responses of the ear-nose-throat patients, the emotionally disturbed patients as well as those of the patients from the medical out-patient clinic to the various questions in the Enugu Somatization Scale have been given in the appendix. In analysing the results, scores on complaints which centred around the head and neck and those around the body were taken separately. The scores of the various groups were compared with one another (see tables 3 and 4). The ear-nose-throat patients scored significantly higher than the medical out-patients in complaints around the head and neck ($t=2.994$; $p < .001$). However, there was no significant difference in the scores of the ear-nose-throat patients and those of the patients from the

Table 3

Mean Scores of Various Categories of Patients on the Enugu Somatization Scale (Standard Deviations are given in parentheses)

Type of Patients	Mean Scores		
	Head	Body	Total
Emotionally disturbed N - 50	8.14 (5.14)	15.20 (7.21)	23.34 (12.35)
E.N.T. Patients N - 50	7.28 (4.6)	9.72 (6.20)	17.00 (10.80)
M.O.P. N - 69	4.78 (4.35)	8.42 (6.18)	13.20 (10.53)
Normals N - 349	3.85 (3.7)	7.47 (4.82)	11.33 (8.52)

medical out-patient clinic on the body. The E.N.T. patients scored more than M.O.P. patients if the scale were to be taken as a whole ($p < .05$). The emotionally disturbed scored significantly higher than E.N.T. patients on the body ($t=4.075$; $p < .001$), but there was no significant difference between the two groups on the head.

Table 4

Significance of difference between means of various groups of Enugu Somatization Scale

Compared Groups	df1	t Values
Neurotics and E.N.T. Patients (head)	97	.94
M.O.P. and E.N.T. Patients (head)	88	2.994**
Normal and E.N.T. Patients (head)	65	3.69**
M.O.P. and Normal (head)	54	1.213
Neurotics and E.N.T. Patients (body)	31	4.075**
M.O.P. and E.N.T. Patients (body)	97	1.137
Normal and E.N.T. Patients (body)	58	2.456*
M.O.P. and Normal (body)	30	1.214
Neurotics and E.N.T. Patients (total)	97	3.069**
M.O.P. and E.N.T. Patients (total)	107	1.94*
Normal and E.N.T. Patients (total)	57	4.14**
Normal and M.O.P. Patients (total)	83	1.986*

1 corrected (Hays, 1973)

* $p < .05$ ** $p < .01$

Furthermore, there was significant difference between E.N.T. patients and normal students. The difference was not only on the head ($t=3.69$; $p < .01$; $df=65$) but also on the body ($t=2.456$). However, it should be noted that there were no significant differences between the normals and patients from the medical out-patient clinic either on the head or on the body. If, on the other hand, the whole scale is taken together, both for the head and for the body, then patients from the medical out-patient clinic would score higher than normals ($t=1.986$; $p < .05$). If in the same way, the scores of E.N.T. patients are compared with those of normal students, the results would be found to be statistically significant ($t=4.14$; $p < .001$). The emotionally disturbed also

scored significantly higher than the E.N.T. patients ($t=3.069$; $p<.01$). These results are shown in tables 3 & 4. It may be noted that in using the distribution to test hypotheses about differences two assumptions are usually made: *viz.*, the population sampled is normal; and the population variance is homogeneous. This makes it necessary to test for normality of distribution and homogeneity of variance before using the t-test. We, however, violated this rule because the sample sizes are not too small and use was made of a correction (Hays, 1973) in degrees of freedom:

$$df = \frac{(\text{est. } \sigma^2_{M_1} + \text{est. } \sigma^2_{M_2})^2}{(\text{est. } \sigma^2_{M_1})^2 / (N_1 + 1) + (\text{est. } \sigma^2_{M_2})^2 / (N_2 + 1)} - 2$$

DISCUSSION

The analysis of the results has shown that E.N.T. patients outscored normals and patients from the medical out-patient clinic on the Enugu Somatization Scale. There was no significant difference between the scores of the E.N.T. patients and those of the neurotics on items centering on the head. On the body, the emotionally disturbed scored much higher than the other groups whose scores are not much different from one another. Further analysis shows that the E.N.T. patients invariably complain of heat in the head, headache, dizziness, pain in the eyes and tinnitus. Others complain of a choking sensation, difficulty in swallowing or a sensation of lump in the throat. The last mentioned complaints are, of course, typical of a lump in the throat syndrome or globus hystericus. From the clinical examination of the E.N.T. patients, it seems certain that some of their somatic complaints result from an existing organic illness such as sensorineural deafness, but some of those who manifest syndromes such as tinnitus, lack understanding. This deficiency thereby generates fear and anxiety as most of the patients falsely believe that it could lead to either mental problems or to death. Other somatic complaints do not seem to have any organic basis.

Mostly globus hystericus and tension headache are often a result of emotional disturbance—loss of close relation, intractable personal problems and chronic anxiety about the future.

CONCLUSION

The results of this study highlight ear, nose and throat as an area of frequent psychosomatic complaints. The explanation for this may be that the area is still poorly understood. Any E.N.T. problem, therefore, generates a lot of anxiety and fear. There is a need for psychological orientation for E.N.T. surgeons — particularly in the developing countries. There is also a call for close co-operation between E.N.T. surgeons, psychiatrists and clinical psychologists in order to help the patients better.

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Appendix

Percentage positive response of Ear, Nose and Throat patients, Neurotics (emotionally disturbed) Medical Out-Patients and Normals on the Enugu Somatization Scale

No.	Items	P a t i e n t s			
		ENT N-50	Neurotic N-50	MOP N-60	Normals N-349
1.	Occasionally I experience heat sensation in my head	60	74	40.58	35.24
2.	Sometimes it seems as if pepper were put into my head	28	34	10.14	11.18
3.	I have the feeling of something like water in my brain	20	18	11.59	9.17
4.	Things like ants keep on creeping in various parts of my brain	26	34	15.94	10.60
5.	I am convinced some types of worms are in my head	12	30	5.80	5.44
6.	If you look on my head exactly, you can see it is sort of breathing	28	30	17.39	13.75
7.	Some spot/spots in my head are so painful that I believe there is an injury or sore inside my brain	22	38	13.04	10.03
8.	My head seems to be bursting so that I have to hold my head to prevent it	28	36	20.29	19.20
9.	I am convinced my head expands and contracts	16	30	14.49	16.33

10. My head is so heavy that I feel I am carrying a heavy load	28	44	26.09	21.20
11. I have very constantly severe headache	60	62	39.13	31.81
12. By merely touching parts of my brain it hurts	8	14	13.04	8.88
13. To be able to remain healthy I must shave my hair completely and constantly	12	22	13.04	6.88
14. My eyes are painful	42	40	28.99	24.93
15. I can no longer see properly	18	36	28.99	11.75
16. My eyelids are so heavy	10	34	18.84	13.89
17. I have heat sensation in my eyes	14	24	18.84	17.77
18. There are some hairs that seem to have entered my ear and blow some air constantly or make some constant noise	54	28	10.14	10.03
19. For sometime now I have been feeling very dizzy	62	58	31.88	29.80
20. I have needle-like pinching in my head	24	32	13.04	7.74
21. The heating in my head is like that from a hammer	16	28	27.54	13.75
22. I have a feeling that something is blocking my throat	52	42	11.59	16.05
23. When I swallow something I can feel it travel very slowly down my throat to the stomach	42	34	18.84	28.37
24. My shoulder is heavy as if I were carrying a heavy load	18	50	17.39	13.18
25. I have the feeling as if a six inches nail got stuck in my back	16	40	17.39	12.32

26.I feel that there is some sore/ injury on my chest, especially the left part of my chest	14	46	17.39	10.89
27.I feel hot internally on all parts of my body	32	46	31.88	18.91
28.I feel heat internally only on selected parts of my body	24	40	24.64	26.36
29.Sometimes I have difficulty in breathing	32	50	15.94	18.05
30.I breath in such little air I sometimes fear I would suffocate	26	42	10.14	16.91
31.Intermittently I must breathe in fast otherwise I would be gone	18	18	8.70	11.75
32.Clearly parts of my body are out of order	22	34	28.99	16.33
33.I know my body is not alright but nobody seems to believe me	18	66	44.93	16.33
34.This, my disorder, appears to be out of the reach of medical doctors	10	36	13.04	16.33
35.I am convinced that only the traditional healers can do the job on me	-	2	-	6.59
36.Such trouble as I have cannot easily be discovered by medical test	4	24	15.94	10.60
37.Sometimes my heart suddenly wants to fly out (Obilommiri)	52	62	30.43	39.54
38.You can hear the heating of my heart from a distance	28	10	13.04	9.17
39.I have biting sensation all over my body	20	34	14.49	9.17

40.I feel pains right inside the arrow of the bones of my hands and legs	12	38	33.33	16.91
41.Very often I sweat profusely without having done adequate physical exercise	32	44	31.88	42.98
42.Something like worm lives in my body crawling at times to different parts of my body	8	30	21.74	16.91
43.The thing that worries me is not steady, it comes to different parts of the body at will	30	46	27.54	20.63
44.I feel that various parts of my body shiver	16	38	28.99	19.48
45.Sometimes I feel so restless that I fear I would not be able to control it and go mad	24	34	13.04	14.90
46.It is difficult for me to explain to the doctor what is wrong with my body	18	38	23.19	18.34
47.My problem is that I cannot sleep	18	32	8.70	8.02
48.I feel general weakness on all parts of my body	24	54	49.28	31.81
49.While walking my feet cannot stand firm on the ground	20	28	14.49	6.30
50.Very often I have continuous noise in my belly	30	54	28.99	30.66
51.My body is very light	44	42	28.99	28.08
52.I have no erection at all in situ- ations where I used to be sex- ually aroused	12	16	8.70	5.16
53.I experience itching sensation on different parts of my body	16	40	13.04	14.90

54. At the moment I get very weak erection	18	32	15.94	10.89
55. My whole body is alright	66	90	65.22	41.26
56. My whole body is just dead that is the feeling I have	2	18	8.70	1.43
57. One part of my body is occasionally lamed	2	12	7.25	5.16
58. Sometimes I get goose skin without warning	44	26	1.45	16.33
59. My bodily symptoms worsen after sexual intercourse	22	20	10.14	8.60
60. I feel some minor cramps (Tita Ngweli)	50	44	31.88	5.10
61. I feel that I have dried up	26	28	20.29	11.75
62. I feel pain each time I engage in sexual intercourse	6	10	10.14	7.45
63. The middle of the sole of my feet is one of my main problems, I must continue to stretch my feet to get it somehow alright at times	8	18	14.49	8.02
64. Whenever the sun is shining I cannot walk far on foot, otherwise I am sure to collapse	20	40	18.84	12.32
65. I feel a very heavy weight pressing me down whenever I sleep	16	22	14.49	13.47