

## Religiosity in Bipolar Disorder

Asma Tabassum\*

Banasthali Vidyapith, India

### INTRODUCTION

Having an expanded spotlight on religion or strict exercises is a potential symptom of mania and hypomania in bipolar disorder. This uplifted focus isn't really remarkable to bipolar disorder, nonetheless, as it is additionally connected with schizophrenia, schizophreniform disorder, schizoaffective confusion, and other psychotic disorders.

This expanded religiosity may take numerous structures some more unobtrusive than others and not all are demonstrative of psychosis. Here are a few models (using hypothetical patients):

1. Janie was brought up in a Protestant home but quit going to church in her teenage. After the beginning of bipolar side effects, however, she started going to more than one service in 7 days, volunteering, joining study gatherings, and looking for individual strict directing from the minister.
2. Ed had never been to any religious services or occasions in his life, yet as he developed symptoms of mental illness and was later determined to have schizophrenia, he started conversing with companions about God to an ever increasing extent, perusing the Bible, at last tumbling to his knees and asking resoundingly paying little mind to where he was.
3. When Terri, a passionate Jew for her entire life, built up a schizoaffective disorder, she became persuaded that God felt she was dishonorable and endeavored suicide.
4. Jerry, who has bipolar disorder, started to focus more on his religious beliefs when his symptoms started, finding that they supported him in troublesome occasions.

Terri's doctor may give a prompt diagnosis of having religious delusions. While, in the cases of Janie and Ed, a psychiatrist may feel such diagnosis would be untimely. Furthermore, for Jerry's situation, now, his beliefs sound supportive rather than hazardous.

According to Harold G. Koenig (2007) stated "While about 33% of psychoses have strict religiosity, not all strict religious

experiences are psychoses."

As per Koenig findings sometime spiritual methodologies might be helpful for the patient-as for Jerry's situation. He concluded saying when religious delusions are not immediate and obvious then psychiatrist needs to analyze the patient's religious beliefs and practices cautiously.

### What Are Religious Delusions?

Delusions are characterized as "firmly held false beliefs," and various sorts incorporate suspicious or persecutory delusions, delusions of reference, and delusions of glory, whimsical desire and others. Two of these, specifically, may communicate in a strict setting. Some examples are listed below:

Religious paranoid delusions: "Evil soul are watching me, following me, holding grudges on me to punish in the event that I do anything they don't like," or "On the off chance that I put on my shoes, God will set them ablaze to punish me, so I should go barefoot constantly." Auditory hallucinations e.g. "The voices continue letting me know there are fiends in my room," all these are combined with religious paranoia.

Religious delusions of magnificence: "God has lifted up me above you, typical individuals. He reveals to me I needn't bother with assistance, needn't bother with medication. I'm going to paradise and every one of you will go to hell" or "I am Christ reawakened."

### Cultural Effects on Religious Delusions

A 2015 meta-investigation of 55 studies examined the connection between Religious delusions (RD) and religious hallucinations (RH) in nations around the globe.

A study done in the United States in the year 2001 found that the degree of religious involvement anticipated the seriousness of religious delusions, and that Protestants were more likely to experience RD than Roman Catholics. In 2002, study in England revealed a higher relationship of religious belief and religious delusion subjected with schizophrenia.

\*Corresponding author: Asma Tabassum, Banasthali Vidyapith, India, E-mail: asmara14860@gmail.com

Received date: November 20, 2020; Accepted date: November 28, 2020; Published date: December 6, 2020

Citation: Tabassum A (2020) Religiosity in Bipolar Disorder. Bipolar Disord 6: 134. doi:10.35248/2472-1077.20.6.134.

Copyright: © 2020 Tabassum A. This is an open access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original work is properly cited.

Moreover, In Pakistan (2010) investigation on Muslim patients with schizophrenia stated that "more religious patients are both bound to encounter RD and to hear voices of religious paranoia.

In contrast to these findings, the meta-analysis focused that a study conducted in 2008 on schizophrenic patients in Lithuania" concluded from multivariate examination that religiosity doesn't directly impact the religious content of delusions and hallucinations," furthermore exploration is yet required.

Researcher Koenig reported that "Patients who experience extreme and persistent mental illness frequently visit for treatment with religious delusions. As per the survey report in United States, approximately 25%-39% of patients with schizophrenia and 15%-22% of those with mania / bipolar have religious delusions".

### **Impact of Religion and Religious Delusions in Psychotic Disorders**

Numerous patients with psychotic disorders consider spiritual faith as an important mechanism in order to cope up with disorder. For the individuals who are not delusional, for them religious beliefs and practices are actually found to be way for dealing with stress, according to some researches.

Alternately, having religious delusions has been discovered to be related with a more severe course of illness and less fortunate results. A research indicated that patients with religious delusions had more severe psychotic symptoms, history of illness, and reduced functioning before the onset of a psychotic episode.

Doctors should remember include a patient's beliefs for assessing the patient as a whole and carefully recognize difference between strong religious beliefs and delusions.

### **Religion, Delusion, and Psychosis**

Notwithstanding the clashing examination on whether the way of life of a nation affects the frequency of strict hallucinations, it is positively a zone of interest for additional investigation.

In the event that there's one thing that researchers do concede to, it's that the individuals who treat people with psychoses should be sensitive towards patient's non-delusional religious beliefs, both in recognizing them from delusions and in assessing how supportive they are conceivably to the patient.