

What if schizophrenics really are possessed by demons, after all?

Published June 3, 2014 | By [Rebecca Roache](#)

By [Rebecca Roache](#)

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Is there anything wrong with seriously entertaining this possibility? Not according to the author of a research article published this month in [Journal of Religion and Health](#). In '[Schizophrenia or possession?](#)',¹ M. Kemal Irmak notes that schizophrenia is a devastating chronic mental condition often characterised by auditory hallucinations. Since it is difficult to make sense of these hallucinations, Irmak invites us 'to consider the possibility of a demonic world' (p. 775). Demons, he tells us, are 'intelligent and unseen creatures that occupy a parallel world to that of mankind' (p. 775). They have an 'ability to possess and take over the minds and bodies of humans' (p. 775), in which case '[d]emonic possession can manifest with a range of bizarre behaviors which could be interpreted as a number of different psychotic disorders' (p. 775). The lessons for schizophrenia that Irmak draws from these observations are worth quoting in full:

As seen above, there exist similarities between the clinical symptoms of schizophrenia and demonic possession. Common symptoms in schizophrenia and demonic possession such as hallucinations and delusions may be a result of the fact that demons in the vicinity of the brain may form the symptoms of schizophrenia. Delusions of schizophrenia such as "My feelings and movements are controlled by others in a certain way" and "They put thoughts in my head that are not mine" may be thoughts that stem from the effects of demons on the brain. In schizophrenia, the hallucination may be an auditory input also derived from demons, and the patient may hear these inputs not audible to the observer. The hallucination in schizophrenia may therefore be an illusion—a false interpretation of a real sensory image formed by demons. This input seems to be construed by the patient as "bad things," reflecting the operation of the nervous system on the poorly structured sensory input to form an acceptable percept. On the other hand, auditory hallucinations expressed as voices

arguing with one another and talking to the patient in the third person may be a result of the presence of more than one demon in the body. (p. 776)

Irmak concludes that 'it is time for medical professions to consider the possibility of demonic possession in the etiology of schizophrenia' and that 'it would be useful for medical professions to work together with faith healers to define better treatment pathways for schizophrenia' (p. 776).

This is a dumbfounding argument, and it is shocking to find it published in a post-mediaeval peer-reviewed journal. Lest anyone suspect me of being unfairly prejudiced against the possibility of demons, let me point out that even those who subscribe to a demonic metaphysics should not be persuaded by Irmak's argument. His observation that 'there exist similarities between the clinical symptoms of schizophrenia and demonic possession' is no more surprising than the observation that there exist similarities between financial compensation for childhood tooth loss and visits by the tooth fairy: in each case, the latter is a hypothesis motivated by a desire to explain the former. If the uncanny similarity between schizophrenia and demonic possession is evidence that demonic possession is real, then the uncanny similarity between financial compensation for childhood tooth loss and visits by the tooth fairy is presumably evidence that the tooth fairy is real. Admittedly, there is an important disanalogy between the two cases: science knows how and why children get compensated for their lost teeth, but not exactly how and why schizophrenics experience auditory hallucinations.² But, even so, in the words of the comedian Dara Ó Briain, 'just because science doesn't know everything doesn't mean you can fill in the gaps with whatever fairy tale most appeals to you'.

What is most concerning about this argument is not that Irmak believes demonic possession to be worthy of serious consideration in explaining schizophrenia. People hold bizarre beliefs all the time, and it may be that Irmak is well-intentioned; indeed, he dedicates his paper 'to the American mathematician John Forbes Nash and to all schizophrenic patients'. What I find more disturbing is that the editorial board and peer reviewers of a scholarly publication, in 2014, find this view of mental illness worthy of dissemination. Those who have espoused similarly fanciful hypotheses about other sorts of misfortunes have, in recent years, been lambasted: recall Glenn


Hodde's claim that [disability is a punishment for sins committed in past lives](#), and William Roache's apparent suggestion that [people wouldn't be sexually abused unless they had misbehaved 'in previous lives or whatever'](#). Such views are dehumanising and disrespectful to, respectively, disabled and sexually abused people, and they shift focus away from serious efforts to improve these people's lives.

Why, then, are schizophrenic patients fair game, at least at the *Journal of Religion and Health*? The most charitable explanation that I can think of is that the publication of the article was a result of gross editorial oversight. Another explanation—one that is perhaps, unfortunately, more realistic—is that there is still a long way to go before those with serious mental illnesses like schizophrenia are universally recognised as suffering from the worst sort of affliction that can befall a person.

References

¹ Irmak, M.K. 2014: 'Schizophrenia or possession?' *Journal of Religion and Health* 53: 773–77.

² If anyone disagrees with this, perhaps the *Journal of Religion and Health* would be interested to hear about it.

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31 Responses to *What if schizophrenics really are possessed by demons, after all?*

- *John* says:

[June 3, 2014 at 4:21 pm](#)

There is such a thing as an evil spirit. When Lucifer rebelled against God in the pre-earth life he was cast out of heaven or the pre-earth life and took a third of

the hosts of heaven with him. These spirits that followed Lucifer are present amongst us today and they want us to be miserable by rebelling against God and becoming subject to him. To find out more please visit mormon.org

[Reply](#)

- *Irene says:*

[June 3, 2014 at 5:26 pm](#)

Whilst this paper is clearly nonsense, I do think that science/ medicine, possibly especially in the area of mental health also has a tendency to “fill in the gaps with whatever fairy tale most appeals”. E.g. in her book “Brain on Fire” a journalist describes her experience where she has a period of psychosis. She is eventually diagnosed with an auto-immune disease (very rare at the time, which has now had many more diagnoses) and cured with steroids but in the meantime, she is quite confidently, and without investigations or tests other than conversations, diagnosed and treated for bipolar depression, alcoholism and (I think) schizophrenia. Most of her doctors weren’t incompetent or reckless, but just following standard procedures.

I suppose what I am trying to say is, just because an explanation is not so absurd as saying someone is possessed isn’t really a reason to congratulate ourselves. The lack of knowledge we have about mental disorders seems to me to mean that some diagnoses are essentially a secular version of saying just that: there is something wrong with this patient that can’t be explained- they are effectively “possessed” by a certain “disease”, but disease in this context just means possessed-like symptoms. Perhaps I am wronging the current state of medicine but I would certainly not be confident that if I were to get an auto immune disease that needs treatment by steroids that affected my behaviour and experiences of the world, I wouldn’t wind up being effectively exorcised by a psychiatrist talking me through it, or witch-doctored with psychotropic drugs that just zombify me

[Reply](#)

- *Rebecca Roache says:*

[June 3, 2014 at 8:03 pm](#)

Thanks Irene. Misdiagnosis is certainly a problem in any area of medicine, and it is perhaps exacerbated in the area of mental health because of the relative lack of understanding of the mind and mental illness, and the fact that psychiatric illnesses are not diagnosed on the basis of tests that give a definitive answer. So, conversations are the key diagnostic tool.

Some psychoanalytic accounts of illness (mental or otherwise) are not much more sensible than the demon hypothesis, and there is much that is wrong with psychiatry. You draw an interesting parallel between medical treatment and exorcism, and I agree that treatment based on inadequate science can be as misguided and ineffective as treatment based on pure bunkum. But, that science is inadequate is not sufficient reason to give up and resort to bunkum, which is what the author of this article is suggesting. I suspect that nobody would dare to advance an analogous argument about a somatic illness: to claim, for example, that since scientists haven't yet cured cancer, we should entertain the possibility that it is caused by annoyed telepathic cats. That expresses a concerning view about mental illness.

[Reply](#)

- *Irene says:*

[June 4, 2014 at 8:34 am](#)

Thanks Rebecca, and I definitely see your point. I suppose I think that underlying both problems is a need we have as people to explain things, and act on them, often way before we actually know anything about them. As a comparison to somatic illness, it might be how we used to practice blood letting for fevers and so on. Because we are so advanced in other areas now I think this prevents real progress in mental illness. We label some set of symptoms schizophrenia and then to the layperson (like me) it

seems equivalent to a disease like cancer where there is a reasonable body of knowledge (though still a work in progress). Whereas in fact some diagnoses (it seems to me) are really just bringing together a set of troubling symptoms and trying to manage them. If this was highlighted more it might a) encourage doctors to first rule out known conditions and b) highlight the urgency of more scientific research into these diseases

[Reply](#)

- *Rebecca Roache* says:

[June 4, 2014 at 2:24 pm](#)

I agree with all of this, Irene. Understanding the mind is arguably the most difficult task facing philosophers, and we still haven't managed it in over two thousand years of considering it. The job of psychiatrists is not only to do the job of philosophers by understanding the mind (or, at least, have a working knowledge of certain aspects of it), but also to fix it when it goes wrong. This, clearly, is an ominous task, and schizophrenia is very poorly understood compared to many somatic illnesses. I think that considering why it is poorly understood is an important part of addressing it: i.e. being aware of what problems need to be solved before it can be effectively treated. I am no expert on this, but I fear that insufficient attention to pre-scientific accounts of schizophrenic symptoms (e.g. possession by demons) is not one of these problems! To put it in perspective, though, some scientists are also mistaken about what problems must be solved before schizophrenia (and other mental illnesses) can be managed effectively ... for example, some think that all we need is a better understanding of biology.

[Reply](#)

- *Anonymous* says:

[June 4, 2014 at 9:52 am](#)

I think your analogy between telepathic cats and cancer, and demons and schizophrenia, is slightly unfair Rebecca. For the following reason: the mental health act and the philosophy of psychiatry more generally seems to recognise an element of 'possession' that has taken place when someone is afflicted with schizophrenia. In so far as the MHA recognises that although a mentally ill person may have capacity, they can still be force treated if their decision would cause grave harm to themselves (among other permutations). This is the case if it is felt their decision is 'the result' of the mental illness. So unlike a Jehovah's witness who can make a capacitious decision to cause grave harm to themselves, a person with schizophrenia who makes the same decision with capacity cannot. I think the mental health act recognises the philosophical claim implicit in this which is that we are not ourselves with severe mental illness. Even though we may be able to weigh and retain information for a decision (capacity), the values that underpin the decision (CIA conspiracy/phobias/delusions of grandeur) are not our own – we would not ordinarily hold these beliefs. So I agree with Irene's suggestions that secular understanding of disease can often make a very similar claim to the 'demon hypothesis' – i.e. usurpation or hijacking of someone's personality by a 'pathology'. Importantly, whilst I agree with this secular interpretation, it is not scientifically grounded – nor can it be. It is normative. It is founded on the ethical questions of how we should understand someone's identity and when we should think they are in control of their own values and beliefs, rather than out of control.

The demon hypothesis – if explicated – would be a load of rubbish I'm sure. We would prefer a theory that found

deregulated dopamine neurones or some cellular pathology, rather than mystery creatures. But it is interesting that the latter theory is so quickly dismissed despite – on its face – having strong similarities to the psychiatry of philosophy more generally. Telepathic cats and cancer does not have this connexion.

[Reply](#)

- *Rebecca Roache* says:

[June 4, 2014 at 2:14 pm](#)

Thanks very much for this. If it is permissible to treat mentally ill people without their consent, then this is plausible because they lack certain important decision-making capacities. It is not necessary to subscribe to the idea of ‘possession’ in order to explain this: we can, instead, point to the reduced practical reasoning abilities of psychotic patients. (Perhaps you are using ‘possession’ in a metaphorical sort of way, in which case I may have no quarrel with it, but this is not the use of the term that I criticise in the post above.) In any case, Irmak does not use possession to explain why it is that schizophrenic patients lack decision-making capacities whilst psychotic, but rather to explain the nature of hallucinations (if I understand his argument correctly). He apparently sees room for such an explanation because science cannot fully account for the experience of hallucinations in psychosis. Science can’t fully explain why cancers develop, either. My point, in drawing a comparison between using demons to explain hallucinations and using telepathic cats to explain cancer, was that incomplete scientific understanding of an illness does not constitute a free-for-all in which any fanciful hypothesis is as good as any other for filling the gaps left by science. Further, since

(I suspect) nobody would seriously contemplate doing this in the case of cancer, it is reasonable to take a dim view of attempts to do it in the case of similarly devastating mental illness, too.

[Reply](#)

- [Sophia Mamuya](#) says:

[June 3, 2014 at 6:32 pm](#)

We'll, you should have in depth knowledge about demonic possession before you think of something quite irrelevant. One needs to do supernatural things for you to believe he is possessed. Schizophrenics don't speak in languages they don't know yet, say spanish, Arabic or German. They just utter nonsense. They don't levitate, or do any thing supernatural, they are simply mentally ill. Scientists are not stupid to argue demons just like that. And again, when they are diagnosed they respond to scientific methods not crosses and prayers. We are all or may be most ignorant if the devil and God exist. But, what you are saying is just, come on!

[Reply](#)

- [Sophia Mamuya](#) says:

[June 3, 2014 at 6:40 pm](#)

We'll, you should have in depth knowledge about demonic possession before you think of something quite irrelevant. One needs to do supernatural things for you to believe he is possessed. Schizophrenics don't speak in languages they don't know yet, say spanish, Arabic or German. They just utter nonsense. They don't levitate, or do any thing supernatural, they are simply mentally ill. Scientists are not stupid to argue demons don't exist just like that. And again, when they are diagnosed they respond to scientific methods not crosses and prayers. We are all or may be most ignorant if the devil and God exist. But, what you are saying is just, come on!

[Reply](#)

- *Materly* says:

[June 3, 2014 at 8:02 pm](#)

This should be met with ridicule. There is no evidence for the supernatural not to talk of characterised demons.

[Reply](#)

- *Materly* says:

[June 3, 2014 at 8:10 pm](#)

This should be met with ridicule. There is no evidence for the supernatural not to talk of characterised demons.

Consider the atrocities that mankind has committed on to each other , if there was meddling supernatural entities at play , it would not be illogical, if we accepted this kind of thinking, to say , that somehow the murdered , the tortured and the raped somehow deserved there fate. Stoneage thinking in a modern age.

[Reply](#)

- *Irish Murdoch* says:

[June 4, 2014 at 4:36 pm](#)

If schizophrenic symptoms are caused by demons “in the vicinity of the brain”, why don’t people standing next to schizophrenics share their symptoms (since if demons are in the vicinity of A’s brain, and B is standing right next to A, then demons are in the vicinity of B’s brain)?

It’s also rather peculiar that Irmak confidently says that schizophrenic symptoms are similar to the symptoms of possession, as if we have all already agreed that possession exists!! What is more, the similarity must exist in the opposite direction too, as similarity is a symmetrical relation. So why not just say that the symptoms of so-called possession are similar to those of schizophrenia, and run the reduction that way: what appears to be possession is in fact schizophrenia, rather than the other way about?

[Reply](#)

- *Rebecca Roache* says:

[June 4, 2014 at 7:18 pm](#)

Thanks Irish ... I agree that there are one or two holes in Irmak's argument 😊

[Reply](#)

- *Douglas Carnall* says:

[June 5, 2014 at 9:49 am](#)

This ox.ac.uk-hosted site has a nasty little tendency not merely to disagree with other authors, but to suggest that their views are unworthy of dissemination, as above. Certainly a possible consequence of disagreement with a published article is that one's esteem for the responsible editor also diminishes. Fine. Read something else. Let the article join the great uncited 50-80% of the scholarly literature. Let the journal's impact factor fall into its boots. Let its publisher go bankrupt.

But if even the ethicists are preferring censorship and suppression over scholarly debate, we are indeed in living in dark times. With even a minimum of consideration for other perspectives, less dumb certainty is possible. It is surely reasonable to be able to discuss one's terminological preference for "schizophrenia" or "demonic possession" in transcultural contexts.

The attraction of the article to the editor might be explained by the following sentence in the abstract: "A local faith healer in our region helps the patients with schizophrenia. His method of treatment seems to be successful because his patients become symptom free after 3 months."

As the article's paywalled there I must leave it. But I'm glad the author exercised their right to publish, and I find in this blog post sad evidence of an ethnological ignorance unworthy of the prestigious domain at which it is hosted.

[Reply](#)

- *Rebecca Roache* says:

[June 5, 2014 at 10:12 am](#)

Thanks Douglas. I think there is much more at stake here than a 'terminological preference'. Whether or not one thinks that schizophrenia is caused by demonic possession has implications for the way in which it is researched and treated, and attitudes towards the mentally ill. If I read you correctly, you also imply that it is important to take into account cultural factors when deciding how to understand and treat mental illness. I agree 100%. But such efforts should complement scientific methods, not replace them.

I am not calling for censorship of views I dislike, merely for the application of certain academic standards. As I say in the blog post above, the author's argument does not stand up even if we remain open-minded about whether or not there are such things as demons. And, as I also say in some of the comments above, I suspect that a similar paper would not have been published if it had been about cancer (i.e. an inadequately understood, devastating, somatic illness) rather than schizophrenia.

Incidentally, the claim you quoted about faith healers is repeated in the paper, but no evidence is offered in support of it. The only evidence offered by the author in support of the claim that faith healers should be used in the treatment of schizophrenia is a paper that reports that 'faith healers may help patients with psychiatric disorders' (I'm quoting Irmak here). This is hardly strong enough to support the author's position about demons, since faith healers may help those with psychiatric disorders merely in the way that talking things over with close friends helps people in distress, or in the way that taking a placebo helps alleviate a variety of afflictions.

[Reply](#)

- o *materly* says:

[June 5, 2014 at 11:00 am](#)

Douglas , im not sure what your saying . Are you opposed to opposition of the original article? As Carl Sagan said , extraordinary claims require extraordinary evidence. Thinking alone does not correspond to evidence. A whole bunch of people think a whole bunch of things , fair enough , but if someone wants me to believe them , then there assertions should be open for debate. We have the medical model , how does the so called demonic model work , if there are supernatural entities at play how can you even model it. Its like discussing physics , and then saying , gravity behaves in infinitely different ways in infinitely different circumstances.

[Reply](#)

- *Douglas Carnall* says:

[June 5, 2014 at 1:14 pm](#)

The line that I particularly objected to was this:

“This is a dumbfounding argument, and it is shocking to find it published in a post-mediaeval peer-reviewed journal.”

—for its emotional inadequacy—the writer being dumbfounded and shocked when presented with an alien point of view;

—and its implicit assumption that the peer reviewed literature, has been, since medieval times (!), some sort of homogenous club to which breaches of the rules of entry are a clear cut matter.

Don't get me wrong. I'm a strict naturalist myself. But it is surely the duty of all philosophers to defend the liberty of expression of all those supernaturalists, metaphysicians and theologians? If people can't express faulty ideas and theories, how will we know if they are faulty or not?

And if a shaman and his clientele are satisfied with the good outcomes they perceive using a shared demonological model of mental illness, this is an interesting natural phenomenon, which is as worthy of respectful scholarly effort as any other.

[Reply](#)

- *Rebecca Roache* says:

[June 6, 2014 at 9:20 am](#)

Re the paywall: if you'd like to read the article, email me (firstname.surname@philosophy.ox.ac.uk) and I'll send you a copy.

It wasn't the alien point of view that dumbfounded me. Abstracting from the fact that the author was writing about demons and schizophrenia, the article takes the form: 'Problem P could be addressed more effectively if the people trying to solve it would accept that S exists'. Beyond remarking that some people believe that S exists, the author offers no reason to believe that S exists, nor any reason to believe that if S exists, S causes P. Implicit in all this is the acknowledgement that most people do not believe S exists. What dumbfounded me was not that the belief that S exists is unusual, but that the editorial board and peer reviewers of a journal at one of the biggest academic publishers thought it worth publishing an article that makes a highly controversial claim without providing any argument whatsoever to support that claim. '[B]reaches of the rules of entry' to peer-reviewed literature are not at all a 'clear cut matter', but there are cases where it is clear that an article ought not to be allowed entry. Such cases include articles that follow the sort of format I have just described.

As a further remark, and from a more personal point of view, I find the article objectionable in that it promotes a view of schizophrenic people that those who suffer from, treat, or campaign about schizophrenia are still working hard to escape from; i.e. the view that schizophrenic people are in some sense less than human, or something other than 'ill'. This is not to say that I think any article that promoted such a view would be unworthy of publication. An article that rigorously argues for an objectionable viewpoint is entitled to a place in academic literature (indeed, most academic publications fall into this category, from

somebody's point of view). But Irmak's article does not rigorously argue for its controversial claim.

There are some claims that are perhaps closely related to the Irmak's claim, which I would view as very worthy of discussion. These include the claim that the fact (if it is one) that some schizophrenic people believe in demonic possession, or belong to communities where this belief is popular, means that it might be important for treatment of schizophrenia in those circumstances to be sensitive to this belief (along with other aspects of the patient's culture). These also include the claim that if faith healing can be proven to be effective in treating mental illness, then there is a strong case for using it even if it is based on false or unproven beliefs (which would, I guess, be similar to the argument for using placebos as treatments in some cases).

[Reply](#)

- *Anders Sandberg* says:

[June 5, 2014 at 6:20 pm](#)

I wonder if traditional religious people would actually like the paper to be taken seriously.

Imagine a proper study of the demon hypothesis. It would likely involve randomized controlled trials of exorcisms on patients: real exorcism corresponding to patient belief system, real exorcism not corresponding to belief, fake exorcism corresponding to belief (i.e. subtly 'defanged' ritual), fake exorcism not corresponding to belief, and a control group.

If there is no effect of exorcism, then it is bad for religious belief (or at least belief in exorcism). If there is a culture-specific effect of exorcism (contrasted with fake exorcism) then this suggests religious relativism. If exorcism using one belief system works even on non-believers but other belief systems doesn't work it might at first seem we have some evidence for that belief system. Yet most faiths seem very unwilling to do this kind of comparison:

perhaps because if one faith happens to be correct, then the majority of people – no matter how sincere – must be wrong about their faith.

And of course, if we actually do get evidence for demons there will no doubt be a lot of further investigation that might be deeply problematic. After all, it would open what was previously claimed to be metaphysical questions to investigation. What if their properties did not fit with dogma? What if applied demonologists start developing more active exorcisms based not on faith but on empirical results? What about Big Pharma patenting blessed antipsychotic medications? (“Pfizer shares went up today as FDA approved Serenace Litany(tm)”)

There is something curious going on with many non-naturalistic beliefs: they desperately try to remain non-naturalistic. Real evidence would make the previously supernatural natural (in some expanded sense of natural). But believers typically do not want the Hubble telescope to find God (“Oh, He has right ascension 12h 30m 49.42338s and declination +12° 23' 28.0439"!”) or Hawking to show that He resides in a particular 72-dimensional manifold. They want meaningful signs that link to their experienced lives, and they typically do not consider meaning to reside in the natural world. So the actual discovery of demons would not just reduce the meaning of demons, it would actually threaten the meaning of other supernatural entities.

But the reverse is also true: if schizophrenia could be moved away from naturalistic explanations into a non-naturalistic domain, it might be seen as a way of enriching the world of the non-naturalists. I suspect this was motivating the paper. The problem is of course that proper research would not just quietly give up an unsolved problem as supernatural, but actually continue to check for natural explanations and to see if the supernatural hypothesis produces lawful observations.

[Reply](#)

- *Rebecca Roache* says:

[June 6, 2014 at 9:28 am](#)

Thanks Anders – you have put your finger on something that I have been struggling to clarify! The *Journal of Religion and Health* can perhaps find some useful and productive ways to bring together religion and health, but this article is not an example of that. The epistemic standards for holding religious beliefs and beliefs about the nature and treatment of diseases are different, as you note. This article is perhaps an example of trying to get the scientists involved in a certain aspect of health research to adopt epistemic standards that are appropriate to religious belief, but not to science. So, whilst the fact that some communities believe in demons might be a reason to take that belief seriously as a religious belief, it is not a reason for scientists to take it seriously. To get scientists to take it seriously, we'd have to do the sort of thing that you describe, and then it seems to become something other than a religious belief ...

Of course, as I mentioned in a comment above, whilst science has no reason (in the absence of evidence) to take seriously the claim that demons exist, it does have reason to take seriously the fact that some people believe in demons, if this is relevant (for example) to the effective treatment of certain patients.

[Reply](#)

- *Douglas Carnall* says:

[June 6, 2014 at 12:00 am](#)

>traditional religious people

Who they? Can you be a little more specific? Not all religions have demons...

>would like the paper to be taken seriously

If they could read it. I haven't managed to yet, and I'm highly educated, reasonably well-off, and fairly resourceful, but outside the paywall. Not that the review has really drawn me to do so; I contributed here because I expect

(perhaps quite unreasonably) the highest standards of scholarly behaviour from oxon ethicists.

>proper study of the demon hypothesis

The proper study of religious phenomena in other cultures uses ethnographic techniques. Ethical recruitment to any RCT in a culture in which an RCT is an alien method is highly problematic—what would informed consent look like?—never mind in the domain that my culture taught me to call “mental health.” If you reflect for a moment on the infrastructure necessary to practically conduct an RCT, in many parts of the world this requires a development agenda, which of necessity imports its own ideology and belief system in opposition, or at any rate parallel, with indigenous systems.

All this is very well studied: the introductory medical anthropology text recommended to undergraduates back in my day was Cecil Helman’s *Culture, Health and Illness*. It’s now in its fifth edition, so Amazon tells me. Perusal thereof might ward off some demons, what what?

[Reply](#)

- o *Anders Sandberg* says:

[June 6, 2014 at 5:50 pm](#)

> The proper study of religious phenomena in other cultures uses ethnographic techniques.

Yes, but the proper study of medical phenomena is RCT. And if we were to regard demons as a possible cause of schizophrenia, why apply the methodology of a different field? And why is ethnography applicable to religious phenomena rather than theology? Both RCT and ethnography are alien to the religious view.

OK, I am slightly facetious here. Ethnography is quite relevant for understanding how patients and others construct mental illnesses, and the role religions play for them. Different fields – maybe even theology –

may be able to contribute usefully. But then they will have to open up for the possibility that the problem might stretch across discipline boundaries, and that the findings they help establish may eventually undermine their own ontology (once epidemics was largely seen as a religious problem, but investigation has moved it outside applied theology and into biology and public health; the role of religion these days in epidemic management is mostly in psychological comfort rather than divine prevention). Honest investigation of a problem by any discipline means the discipline also risks discovering that it is not applicable.

Note that my thought experiment did not assume the experiments were ethical: running fake exorcisms might be worse than giving placebo, since we toy with people's beliefs. But even an unethical medical experiment may give useful information (leaving us in a quandary about whether to use it).

[Reply](#)

- *b.akoiry* says:

[June 6, 2014 at 10:18 am](#)

Very irrational!!! In the past centuries hysteria was considered as demoniac possession and patients were burned!!! Religion should stay far away from science. And who even proved the existence of demons or god???

[Reply](#)

- *Douglas Carnall* says:

[June 6, 2014 at 8:18 pm](#)

The kind of multidisciplinary effort they've assembled at Durham is surely the way forward with this kind of difficult issue:

<https://www.dur.ac.uk/hearingthevoice/> (HT Iain Bamforth)

[Reply](#)

- *Rebecca Roache* says:

[June 6, 2014 at 8:25 pm](#)

Agreed – we have a similarly multidisciplinary effort on mental illness here at Oxford, too: <http://www.loebelprogramme.ox.ac.uk/>

[Reply](#)

- *Musa* says:

[June 7, 2014 at 7:58 am](#)

You know nothing about the subject, yet you do your best to discard it. Actually, it is about djinns, not demons, but the ones causing all these are most likely bad djinns. For example a commentator asks “why don’t people standing next to schizophrenics share their symptoms”, if I punch you, would that affect the person next to you? There are many such cases where when a member of a family is affected, others are also affected by time. If you are just so prejudiced. The other commentator says “Very irrational!!! In the past centuries hysteria was considered as demoniac possession and patients were burned!!! Religion should stay far away from science. And who even proved the existence of demons or god???” It was your ancestors who were burning people, not the Turks. People with such symptoms were never held accountable for anything in the Ottoman Empire. We were using music, water, colors, etc. to relax and cure people with mental illnesses, why you were torturing and burning them. If you are going to criticize a point of view, do it after you made an effort to learn one or two things about the subject. You are so prejudiced, as much as your ancestors torturing and burning people.

[Reply](#)

- *Musa* says:

[June 7, 2014 at 11:14 am](#)

Musa , if you choose to believe something that is without evidence thats fair enough , a democratic and free society should protect that , but if you wish to influence national and local policy to extend your beliefs

and force them on other people then your beliefs should be backed up by evidence. And there is no evidence for the supernatural.

[Reply](#)

- *Materly* says:

[June 7, 2014 at 11:19 am](#)

I incorrectly put 'musa' as the author of the previous post.

[Reply](#)

- *Mua* says:

[June 7, 2014 at 4:44 pm](#)

It is not supernatural. It is what you call it in the West. We know more about what you call "supernatural" than scientists know about dimensions, gravitational and magnetic fields, dark matter and energy, anti-matter, etc. You cannot tell me the reason or cause of gravitation. You only know it effects, you still know something causes it out there though, and as I have said, we know more about what you call "supernatural" than scientists know about those subjects.

[Reply](#)

- *Douglas Carnall* says:

[June 7, 2014 at 8:39 pm](#)

>the proper study of medical phenomena is RCT

The preferred level of evidence for the effectiveness of any intervention would be from one or more RCTs, it is true. But even the faithful of the church of EBM acknowledge that other kinds of studies may be performed, and offer a system to rank them: <http://www.cebm.net/index.aspx?o=1025>

Why might this be?

And the clinician making daily decisions about patients ideally would not read individual studies, but appropriate syntheses (<http://ebm.bmj.com/content/6/2/36.full>).

So it is really not so simple as you paint it my dear Anders: a multitude of study methods of medical phenomena exist for good reason.

As for knowledge from “unethical studies,” there is no quandary: if you can’t trust the authors to treat the patients ethically, what else can you trust them with? With any research on humans (or indeed animals) first we do ethics, then we do science.

[Reply](#)

- *Assoc.Prof.Dr.Armagan Samanci* says:

[June 16, 2014 at 9:21 pm](#)

M.Kemal Irmak is not a psychiatrist.He is a retired professor of histology and embryology . It appears he had written such article with his convictions rather than a scientific basis.

Improbable Science

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[Count the tempestuous assumptions](#) »

Schizophrenia – caused by demons?



“[The causes of schizophrenia](#) have been the subject of much debate”, and the debate is now extended with a new possibility proposed by Dr.

Kemal Irmak, of the High Council of Science, [Gulhane Military Medical Academy](#), Ankara, Turkey.

In the June 2014 issue (Volume 53, Issue 3, pp 773-777) of the [Journal of Religion and Health](#) (which is an “international interdisciplinary journal which publishes original peer-reviewed articles that deal with mental and physical health in relation to religion and spirituality of all kinds.”) Dr. Irmak and colleagues ask : [Schizophrenia or Possession?](#)

“Hallucinations are a cardinal positive symptom of schizophrenia which deserves careful study in the hope it will give information about the pathophysiology of the disorder. We thought that many so-called hallucinations in schizophrenia are really illusions related to a real environmental stimulus. One approach to this hallucination problem is to consider the possibility of a demonic world. Demons are unseen creatures that are believed to exist in all major religions and have the power to possess humans and control their body. Demonic possession can manifest with a range of bizarre behaviors which could be interpreted as a number of different psychotic disorders with delusions and hallucinations. The hallucination in schizophrenia may therefore be an illusion—a false interpretation of a real sensory image formed by demons.”

The new theory raises an enigmatic question : if [medication helps patients](#), is it acting on the patients themselves, or on the demons which possess them?

Other avenues of research : see: [‘Do shoes cause schizophrenia?’](#)

- See more at: http://www.improbable.com/2014/06/02/schizophrenia-caused-by-demons/?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+ImprobableResearch+%28Improbable+Research%29#sthash.DglBKc3c.dpuf

- cnocspeireag [14 days ago](#)

Asura, this crap comes from Turkey, a nominally secular state but infested with muslim loons. These loons have been diligently outbreeding the sane since Attaturk's day, so it's all downhill there for the foreseeable future.

o



[unity ministry 10 days ago](#)

This is easy enough to explain if you look at the last part of the abstract:

"A local faith healer in our region helps the patients with schizophrenia. His method of treatment seems to be successful because his patients become symptom free after 3 months. Therefore, it would be useful for medical professions to work together with faith healers to define better treatment pathways for schizophrenia."

And if you don't or can't treat a transient psychotic episode with anti-psychotics then it typically takes around three months for the episode to subside of its own accord.

Conclusion: Dr Irmak is as gullible as they come and I just happen to have the deeds to a bridge that I'd like to discuss with him.

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[Brian Klock 10 days ago](#)

Everyone is hung up on terminology ("demons") and the popular folklore behind it. All you have to do is go watch "Being John Malkovich" and "Bruce Almighty" and maybe you'll have that epiphany about what's being talked about here. Well maybe you're naïve enough to believe that it's all nothing more than a bunch of movie jokes.

Published in the Journal of Religion and Health, Turkish researcher M. Kemal Irmak's paper "[Schizophrenia or Possession?](#)" argues that demons "have the power to possess humans and control their body" and that schizophrenic hallucinations are "a false interpretation of a real sensory image formed by demons." Based on anecdotal evidence from one man who claims to have expelled "evil demons from many psychiatric patients with the help of good ones," Irmak concludes that mental health professionals should work together with faith healers to form more holistic treatment options.

The paper has caused ripples within the scientific community and threatens to further tarnish the reputation of the journal's German publisher, Springer. The company came under fire in February when a researcher discovered that Springer had [inadvertently published 18 fake papers](#) that were computer-generated—raising concerns over quality control in their journals.

The following excerpts from Irmak's paper are equally dubious:

- *“Demons are believed to be intelligent and unseen creatures that occupy a parallel world to that of mankind. In many aspects of their world, they are very similar to us. They marry, have children, and die. The life span, however, is far greater than ours (Ashour 1989). ...The ability to possess and take over the minds and bodies of humans is also a power which the demons have utilized greatly over the centuries.”*
- *“Most scholars accept that demons can possess people and can take up physical space within a human's body (Asch 1985). ...When the demon enters the human body, they settle in the control center of the body–brain.”*
- *“Delusions of schizophrenia such as ‘My feelings and movements are controlled by others in a certain way’ and ‘They put thoughts in my head that are not mine’ may be thoughts that stem from the effects of demons on the brain.”*
- *“Auditory hallucinations expressed as voices arguing with one another and talking to the patient in the third person may be a result of the presence of more than one demon in the body.”*
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Anneliese Michel died following an exorcism in 1975. The case of alleged demonic possession became famous—*The Exorcism of Emily Rose* is based on Michel's story. Her parents and priests were charged with negligent homicide after it was declared that she'd been suffering from a misdiagnosed mental illness.

The science site Real Clear Science spoke with Irmack, who admitted that while there is no evidence to support his spurious claims, he believes that our world is indeed inhabited by nefarious spirits. "This is like the argument of creation or evolution. It is a matter of belief and I think the existence of demons cannot be

proved by scientific methods,” [he said](#). Irmack added that schizophrenic mathematician John Nash—whose life was chronicled in *A Beautiful Mind*—is under siege from the spiritual world. “I think the creatures who disturb John Nash are demons.”

Curtis Hart, editor-in-chief of the Journal of Religion and Health and lecturer in public health at Weill Cornell Medical College, told Real Clear Science that he stands behind Irmak’s paper and has no plans to retract it. “The article was published in hopes that it would provoke discussion,” he said. “The journal does not agree that demons are a real entity.”

Hart might see the paper’s inclusion as an interesting way to ignite debate, but his peers in the medical community question if it’s a useful one. Dr. Joshua Kantrowitz, director of Columbia University’s Lieber Schizophrenia Research Clinic, dismisses Irmack’s argument as “pretty unfortunate.”

“With respect, this is a way to attract eyes to their journal and not necessarily a legitimate scientific debate,” he says. “People with schizophrenia are prescribed antipsychotics, and they work for most. As the article correctly cites, they don’t work for everybody, but I think it’s a pretty big leap to jump to the explanation offered. There didn’t seem to be much actual evidence or science behind what the author was saying.”

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Schizophrenia is not Demonic Possession

[3 Comments](#) Posted by [Emil Karlsson](#) on June 4, 2014



The Journal of Religion and Health is an allegedly peer-reviewed journal that claims to “explores the most contemporary modes of religious and spiritual thought with particular emphasis on their relevance to current medical and psychological research.” In addition to clinical and statistical papers, they also make room for papers that are “impressionistic” or “anecdotal”. With an impact factor of around 0.8, it barely gets more citations than the average crank journal.

A recent paper published in this publication cements this views. Without any scientific evidence whatsoever, [Irmak \(2014\)](#) makes the assertion that hallucinations associated to schizophrenia are really the result of demonic agency. Demons, according to Irmak, creates real sensory images which the individual misinterprets as an hallucinations. This paper is so blatantly absurd and anti-scientific that it is hard to take seriously. Does this person really believe the stuff he is writing? Why did the journal publish such an obvious piece of nonsense? How on earth did it get passed peer-review? There are many questions that demand answers. This post will go through the claims in the paper and then discuss the responsibility of editors and publishing companies.

Characteristics of alleged “demons”

After an introductory section on schizophrenia, Irmak suggests that demonic causation is one way to approach the etiology of hallucinations:

We thought that many so-called hallucinations in schizophrenia are really illusions related to a real environmental stimulus. Illusions are transformations of perceptions, with a mixing of the reproduced perceptions of the subject’s fantasy with the real perceptions. One approach to this hallucination problem is to consider the possibility of a demonic world.

“We thought”? Really? The idea of demonic possession as an explanation for hallucinations in schizophrenia is taken out of thin air. No argument, no evidence and no justification. Instead, Irmak treats us to a folkloric description of demons. They are “intelligent and unseen creatures that occupy a parallel world to that of mankind”. Parallel world? What exactly does he mean by “parallel world”? We get no explanation. Demons apparently have a considerably longer lifespan than ordinary humans. They can fly, make themselves invisible and “take over” people. Neither evidence nor explanation for how this is done is provided. Instead, Irmak just asserts that “most scholars” believe in demonic possession. It does not take long until the bait-and-switch tactic is deployed:

Demonic possession can manifest with a range of bizarre behaviors which could be interpreted as a number of different psychotic disorders (Al-Habeeb 2003; Boddy 1989). On many occasions, the person has within him more than one demon, and often they talk from their voices. They therefore cause symptoms such as hearing voices and certain delusions (Littlewood 2004; Al-Ashqar and Umar 2003; Pereira et al. 1995).

Irmak has not provided any evidence for the existence of demonic possessions in the first place. Thus, he cannot begin to talk about the alleged clinical presentations of demonic possessions. In reality, it is psychotic conditions that have been misinterpreted as demonic possessions, not the other way around. This is especially clear because of the ad hoc rationalization provided for psychotic symptoms. With this realization in mind, his convoluted ruminations collapses.

Dogmatic religious beliefs masquerading as disinterested analysis

The next section of the paper provides additional details:

As seen above, there exist similarities between the clinical symptoms of schizophrenia and demonic possession

An assertion is not an argument. Irmak has *not* shown that there are similarities between schizophrenia and being possessed by demons. He has merely asserted it.

He has provided no evidence for the existence of demonic possessions or that they have similar clinical symptoms.

Common symptoms in schizophrenia and demonic possession such as hallucinations and delusions may be a result of the fact that demons in the vicinity of the brain may form the symptoms of schizophrenia.

Why should we propose an extremely unlikely explanation (“demonic possession”) when the scientific model (schizophrenia) can explain the existing evidence? If you come home and see a broken window and a baseball on the living room floor, why should we jump to the most unreasonable explanation instead of the obvious one? Saying that it “may” be an extremely unlikely explanation does not cut it. Hypothetically possible does not imply probable or plausible.

Delusions of schizophrenia such as “My feelings and movements are controlled by others in a certain way” and “They put thoughts in my head that are not mine” may be thoughts that stem from the effects of demons on the brain.

Why should it? Irmak provides no evidence or argument.

On the other hand, auditory hallucinations expressed as voices arguing with one another and talking to the patient in the third person may be a result of the presence of more than one demon in the body.

So, in other words, we need to postulate *multiple demons* to be able to explain hallucinations on the demon model. Just one isn’t enough. The plausibility of his ideas has just dropped from zero to minus infinity.

Faith healing is not effective for schizophrenia

As if the multiple-demons-cause-auditory-hallucinations idea was not absurd enough, Irmak goes one step further in the last section of the paper. In a cloud of anecdotes and evidence-free assertions, he wants to promote the cooperation between medical authorities and faith healers:

It has been shown by World Health Organization (WHO) studies that faith healers may help patients with psychiatric disorders (Gater et al. 1991).

The reference provided is a 23-year-old paper that investigates the delays in various treatment facilities for psychiatric conditions in eleven different countries. It has nothing about the efficacy of exorcism performed by faith healers:

The variation in treatments offered by native or religious healers reflects the heterogeneity of centres studied (see Table 11). Almost all the patients who saw native or religious healers in Ujung Pandang and Bangalore say they received some form of treatment from them. In Ujung Pandang this is usually native medicine, but in over a third it is practical help; a main treatment rarely found in any other setting. In Bangalore and Aden a ritual cure is most common followed by herbal remedies, while in Rawalpindi prayer or other spiritual forms of support are common.

In other words, religious “healers” provide patients with herbs, prayer and practical help. It has nothing to do with “demons”. After this obvious false characterization was not enough, Irmak provides a single anecdote for his efficacy claim.

Similarly, B. Erdem is a local faith healer in Ankara who expels the evil demons from many psychiatric patients with the help of good ones. B. Erdem contends that on occasions, the manifestation of psychiatric symptoms may be due to demonic possession. An important indicator of his primary suspicions about the possession is that, if someone has auditory hallucinations, he would remain alert to the possibility that he might be demonically possessed. His method of treatment seems to be successful because his patients become symptom free after 3 months.

So this faith healer “treats” patients by evicting evils demons “with the help of good ones”?! Just when you thought it could not get more absurd. No evidence is provided that patients stop having symptoms.

Above considerations have led to the suggestion that it is time for medical professions to consider the possibility of demonic possession in the etiology of schizophrenia, especially in the cases with hallucinations and delusions. Therefore, it

would be useful for medical professions to work together with faith healers to define better treatment pathways for schizophrenia.

“Above considerations?” You mean implausible assertions and a single anecdote? This is by no means sufficient evidence for the suggestion that “demonic possession” should be part of the etiology of schizophrenia or that we should pollute science-based medicine with fraudulent faith healers.

Who is M. Kemal Irmak?

The author contact information states that he is part of the High Council of Science at the Gulhane Military Medical Academy in Ankara, Turkey. At first I thought this paper was a hoax, written by someone who wants to reveal bad quality control in smaller journals. A [quick pubmed search](#) shows that he has published around 30 papers, including one about a hypothetical scenario where a woman gives birth to a child without a father. Naturally, this was published in another crank journal (Medical Hypothesis).

How could this paper get published?!

The journal in question claims to apply peer-review. Who reviewed this paper and how on earth could it avoid getting rejected? Did it even go through the peer-review pipeline? Was Curtis W. Hart, the editor-in-chief, aware of this paper being published? Why did he not step in? Taking a larger perspective, we also need to ask ourselves why Springer keeps a journal like this afloat.

Publishing a paper denying the biological basis of schizophrenia, proposing the causative effects of demonic possession and recommending “treatments” by fraudulent faith healers is a threat to vulnerable patients who may refuse science-based medical treatments and instead seek out these kind of quack providers.

It is clear that this paper should be retracted and that the peer-review protocols for the journal should be reevaluated.