

Concerns About Schizophrenia or Possession?

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The article “Schizophrenia or Possession?” published in the J Relig Health (2014) (53: 773–777; doi:[10.1007/s10943-012-9673-y](https://doi.org/10.1007/s10943-012-9673-y)) written by M. Kemal Irmak has serious flaws in its arguments about the possibility of demonic possession in patients with schizophrenia which to my concern may misguide patients and families and seriously hinder their access to proper mental health care. The view espoused about schizophrenia as a possession by devils is completely lacking any sound scientific evidence that it is very surprising to see it published in a peer reviewed scientific journal.

First of all in the article, the evidence relating schizophrenia to possession by devils is only based on studies assessing the perceptions of faith healers and the beliefs among clergy, and not on any evidence of the examination of patients by at least a multidisciplinary team of experts and diagnosed according to an acceptable diagnostic system. Furthermore, the claim that a certain B. Erdem believes that he has successfully cured these patients has no substance to it apart from the word of the person. In an era of randomized controlled trials for testing the efficacy of treatments, unacceptable position to propose the possibility of demonic possession and the efficacy of treatments by faith healers on very scant and dubious evidence. The strict criteria necessary to provide scientific evidence for the efficacy of treatments, and the pathogenesis in disorders is completely discarded in the article.

The article talks about consensus in our region, but only rests on research about the perceptions of only faith healers from Saudi Arabia and Sudan, as if the perceptions of faith healers are the sole determinant of the pathogenesis of schizophrenia. If perceptions are our guides than why not include the perceptions of scientists and researchers from relevant disciplines? This position is extremely unusual for a peer reviewed journal article.

I do agree with the view that collaboration with faith healers when necessary is possible; however, the scope of this collaboration needs to be determined by scientific studies on the

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process and methods that needs to be subsequently followed by such practice. Having worked with patients with schizophrenia and their families for many years, my main concern and objection is that these unsubstantiated views may misguide them in their search for the best methods of management of their conditions and may place incredible and unnecessary burden and pain for those involved. Thus, the ethical problems involved in espousing the view without stating that we lack scientific basis for these views is quite problematic. Patients with schizophrenia and their families have the right to reach evidence-based medical and psychosocial rehabilitation procedures, and furthermore, we need to change the social stigma attached with the illness. The views in the article have the potential of hindering both of these and thus needs to be very cautiously considered.