## Is there a general cause for Parkinson's to be found in inferiority feelings?

## DOI 10.13140/RG.2.2.28968.704

Parkinson's disease (PD), or simply Parkinson's, is one of the fastest growing diseases and some speak of a Parkinson pandemic as the numbers of patients rise, especially in the Western world, where PD is the second most common neurodegenerative disorder. It's a long-term degenerative disorder of the central nervous system that mainly affects the motor system and in later stages many organs and leads to dementia. It mainly affects older people, but there are many younger patients too. The symptoms usually emerge slowly and, as the disease worsens, non-motor symptoms become more common.

In addition to cognitive impairment and sleep disorders, PD-patients often have neuropsychiatric symptoms such as depression, anxiety, apathy and impulse control disorders (ICDs) as common non-motor symptoms. The symptoms of the disease result from the death of cells in the substantia nigra, a region of the midbrain, leading to a dopamine deficit, affecting the reward, pleasure and happiness mechanisms, in medical terms the motivational salience and the approach and avoidance behavior. Neurotransmitters like dopamine are correlated to the nervus vagus and HPA-axis, connecting the gut biome with the brains, dysbiosis in the gut flora helps to diagnose PD. The material cause of PD is unknown, with both inherited and (epigenetic) environmental factors like exposure to pesticides playing a role. There are indications that genetic factors play a role in the susceptibility to PD and experiments with mice have shown this could indicate a cure for PD.

There is, however, at this time no general cure for PD; treatment aims to improve the symptoms; there are now medications like L-DOPA, MAO-B inhibitors, or dopamine agonists .that do help at the symptomatic level and limit the impact of the disease.

Could it be the disease (given genetic likelihood) is the result of a mind-state? Almost all studies point to personality disorders as a consequence of Parkinson, not a result of a personality disorder.

The question I ask has to do with observations in a limited group of PD patients, and noticing improved motor functions for some hours after taking mild psychedelics, indicating that PD might be limited to one personality of a patients identity-matrix. But there is more. PD is not a new disease, already in the industrial revolution in England the symptom were well-known. The English doctor James Parkinson published the first detailed description in "An Essay on the Shaking Palsy, in 1817. This was the time farmers were turned into factory workers, without much autonomy or conditions that would stimulate self-esteem.

The research into PD has been almost exclusively into the biological (somatic) effects, looking at the neural and neurotransmitter mechanisms at play, the mechanical perspective of cause and effect. Much has been published about environmental or endogenous toxic agents and PD incidence. The idea, that specific personality or better identity factors play a role and could be used as an indication for susceptibility of PD has not been at the forefront of research. Stress history and trauma-immunity might play a role here, but there are no conclusive studies. For instance, one has established an association between PTSD and Alzheimer's but the association between PTSD and Parkinson's disease remains unclear. Since 1913 patients with Parkinson's disease (PD) have been described as particularly industrious, devoted to hard work, inflexible, punctual, cautious, and moralist. These psychological characteristics have been so constantly reported that the concept of "Parkinsonian personality" emerged. This "parkinsonian personality" has been described by means of several case reports, case series, twin studies, and case-control studies.

There has, however, not been a conclusive study relating Parkinson's to a specific clear personality or identity type, although there are some indicators in the various typology approaches that do indicate correlations. Relating such correlations to broader societal and socio-psychological and socio-economic circumstances, like the stress levels or sense of disenfranchisement in a population, has not been a popular subject.

Is there a relationship between a general sense of failure, of being unable to provide for myself or my family, between inferiority complex and the incidence of PD? Could we relate the peaks in PD incidence in the past and in today's competitive world to a lack of self-worth, in distrust, and doubt about one's abilities? Are Fear Of Missing Out (FOMO), the demand to succeed, to show off one's achievements, the competitiveness of the whole educational system, the living in the shadow of one's peers or bosses, these could be markers for ensuing PD later in life?

But such questions are very relevant, for PD is on the rise, PTSD is on the rise, the psychological health of large parts of the populations is at stake. The focus on material factors that are indicated as the causes of PD, like specific toxins, are maybe the epigenetic factors that are triggered and cause the actual symptoms and degeneration, but could it be that the mindset (conscious and unconscious) is at the root of the whole process? And can such a mindset be identified by means of bio- or psychomarkers, as ameans to predict the susceptibility for PD and take preventive action?

The potential relationship between socio-psychological and soci-economic conditions ,and the susceptibility to the disease deserves more study, but this requires an approach that looks beyond the mechanical and biological and into the mindset of PD victims.

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Personality traits and the risk for Parkinson disease: a prospective study

<u>Johanna Sieurin, Petter Gustavsson, Caroline Elise Weibull, Adina Leiah</u>
<u>Feldman, Giselle Maria Petzinger, Margaret Gatz, Nancy Lee Pedersen, and Karin</u>
Wirdefeldt

Eur J Epidemiol. 2016; 31: 169–175. Published online 2015 Jul

1. doi: <u>10.1007/s10654-015-0062-1</u>

PMCID: PMC4819915 PMID: <u>26130127</u>

This study explored the association between the personality traits, neuroticism and introversion, and risk of Parkinson disease (PD) and concluded both were associated with an increased risk of PD after adjustment. In conclusion, the study provides evidence that neuroticism is associated with an increased risk of PD that is in part suppressed by smoking. There was a weak association between introversion and PD and this effect was at least partly mediated through smoking. The observed effects may partly be explained by familial factors shared by twins.

Accidental discovery leads to Parkinson's disease cure in mice

Brianna Sleezer

in Brain, Health & Medical, Science & Technology, June 2020

After using the chemical to kill dopamine neurons in the mice, researchers silenced PTB, a protein known for its general role in activating or deactivating genes within a cell. Researchers, led by Xiang-Dong Fu, silenced the PTB gene using a technique called siRNA. This has led to the development of a treatment that eliminates symptoms of Parkinson's disease in mice.

Novelty seeking and introversion do not predict the long-term risk of Parkinson disease

<u>G Arabia 1, B R Grossardt, R C Colligan</u>, <u>J H Bower</u>, <u>D M Maraganore</u>, <u>J E Ahlskog</u>, <u>Y E Geda, W A Rocca</u>

Neurology 2010 Jul 27;75(4):349-57. doi: 10.1212/WNL.0b013e3181ea15fd.

A Novel Approach for Investigating Parkinson's Disease Personality and Its Association With Clinical and Psychological Aspects

<u>Laura Carelli, Federica Solca Silvia Torre, Jacopo Pasquini, Claudia Morelli, Rita Pezzati, Francesca Mancini, Andrea Ciammola, 1 Vincenzo Silani</u> and <u>Barbara Poletti 1.</u>

Frontiers in Psychology. 2019; 10: 2265. Published online 2019 Oct 11. doi: 10.3389/fpsyg.2019.02265 PMCID: PMC6798168 PMID: 31681080 Parkinson's disease patients did not show a different personality profile according to the cognitive-constructivist model with respect to controls. However, in this population, a general enhancement in the tendency to codify experience by means of specific cognitive and emotional patterns was associated to disease progression and to a poorer QoL.

Personality and Parkinson's disease: a meta-analysis.

Santangelo G., Garramone F., Baiano C., D'Iorio A., Piscopo F., Raimo S., et al. (2018). in Parkinsonism Relat. Disord. 49 67–74. 10.1016/j.parkreldis.2018.01.013

Personality changes are considered pre-motor features of Parkinson's disease (PD). Cross-sectional studies revealed that PD patients were more introvert, apprehensive, and cautious than healthy subjects (HS), whereas other studies failed to disclose these behavioural traits. Some studies found mixed results concerning Novelty Seeking (NS) and Harm Avoidance (HA) profiles in PD patients. To better clarify the personality profile in PD we performed a meta-analysis on studies exploring such topic according to both Cloninger's Psychobiological Model (PM) and Big Five Model (BFM). As for PM, PD patients scored higher on HA and lower on NS than HS. No difference was found on Reward Dependence, Perseverance/Persistence and on character level. As for BFM, higher levels of Neuroticism, but lower levels of Openness and Extraversion were associated with PD.

Association of Stress-Related Disorders With Subsequent Neurodegenerative Diseases

Huan Song, Johanna Sieurin, Karin Wirdefeldt, Nancy L. Pedersen, Catarina Almqvist, Henrik Larsson, Unnur A. Valdimarsdóttir, and Fang Fang. JAMA Neurol. 2020 Jun: 77(6): 1–11. Published online 2020 Mar 9.

doi: 10.1001/jamaneurol.2020.0117 PMCID: PMC7063561 PMID: 32150226

Posttraumatic stress disorder (PTSD) has been associated with increased risk for dementia. Less is known, however, about other stress-related disorders and their associations with neurodegenerative diseases. In a nationwide cohort study of individuals with stress-related disorders and those without such disorders, the exposed individuals were at a considerably higher risk of developing neurodegenerative diseases compared with their matched unexposed counterparts. This risk elevation was more pronounced for vascular neurodegenerative diseases (risk increase of 80%) than for primary neurodegenerative diseases (risk increase of 80%) than for primary neurodegenerative diseases (risk increase of 31%). The population-matched cohort included 61 748 exposed individuals and 595 335 matched unexposed individuals. A statistically significant association was found for Alzheimer disease (HR, 1.36; 95% CI, 1.12-1.67) but not Parkinson disease (HR, 1.20; 95% CI, 0.98-1.47) or amyotrophic lateral sclerosis (HR, 1.20; 95% CI, 0.74-1.96).

These findings suggest that stress-related disorders may be associated with the subsequent risk of neurodegenerative diseases, possibly through a cerebrovascular pathway.

Re-examining the Parkinsonian personality hypothesis: a systematic review.

Cerasa A. in Pers Individ Differ. (2018) 130:41–50. 10.1016/j.paid.2018.03.045 Under different points of view, the "Parkinsonian personality," as it has been consistently reported shares several clinical features with the obsessive compulsive personality disorder (OCPeD) as classified in the Diagnostic and Statistical Manual for Mental Disorders (DSM).

Ted Dawson: New Animal Study Adds to Evidence of Parkinson's Disease Origins in the Gut, in the journal Neuron, 06/2019

Experiments in mice show transmission of nerve-killing protein from the gut into the brain.

"These findings provide further proof of the gut's role in Parkinson's disease, and give us a model to study the disease's progression from the start," says Ted Dawson, M.D., Ph.D., director of the Johns Hopkins Institute for Cell Engineering and professor of neurology at the Johns Hopkins University School of Medicine.

Identity 2.0, the dance of our substitute identities and the illlusion of digital identity

Luc Sala with Stanley Krippner, Steve Speer & Denice Leverett A 520 page perspective on substitute identity formation and the identity-matrix (update from Identity). ISBN 9789492079350 (2019)