## CORRELATION BETWEEN THE BEHAVIOURAL TYPE AND RECEPTIVITY TO THE CORONARY HEART DISEASE

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Abstract: There is a close interdependence between the behavioural type that characterises people and the receptivity to a certain disease. The ability to offer a diagnosis and to recognize multiple somatic pains involves knowing the situation by the family doctor. A correct comprehension of the relation between general and individual, of the notion of constitution and the understanding of the dynamics of the process of the illness are indispensable for an efficient therapy. Observing a connection regarding the psycho-behaviour and the receptivity to a disease is possible only in terms of a good clinical knowledge and a functional interdisciplinary cooperation.

Keywords: behavioural type, coronary heart disease

Rezumat: Între tipul comportamental caracteristic fiecărui individ și receptivitatea la o boală psihosomatică precum boala coronariană există 0 strânsă interdependență. Abilitatea de a diagnostica și recunoaște patologia afectivă mascată de multiple acuze somatice din contextul bolii psihosomatice presupune cunoașterea existenței acestei situații medicale de către medicul de asistență primară. O corectă comprehensiune a raportului dintre individual și general, a noțiunii de constituție (biotipologie) precum și înțelegerea dinamicii procesului de boală sunt indispensabile actualmente aplicării unei terapii eficiente. Observarea existenței unei corelații între tipul psihocomportamental și receptivitatea la boală este posibilă doar în contextul unei bune pregătiri clinice, condiționată de o colaborare interdisciplinară funcțională.

Cuvinte cheie: tip comportamental, boală coronariană

The basic condition in healing is to understand the condition of health and disease, as well as the relation between them. The psycho-somatic approach in medical practice finds its utility in the presence of more than 30% of the symptomathology described by the patient, of acute or chronic stress influence. The so-called disease is a stress - generator. The receptivity and reactivity towards the stress component may aggravate the evolution of the disease and may also become a factor of resistance to the therapy. There is a close interdependence between the behaviour of each individual and the receptivity to a psycho-somatic disease, such as the coronary heart disease. Knowing the existence of the interdependence between the affiliation to a certain psychobehavioral or biotype, as well as the individual reactivity towards the disease is very useful for the establishment of the diagnosis and for the administration of a personalized therapy.

The individualized reactivity is depended on the dynamic influence regarding the individual receptivity, on the lability of the development period of time, on the evolution period covered by the individual. The environment factors occur in the determinism of the somatic or behavioural reactions through certain life experiences.

We may conclude that the determinant factors of the individual's personality are: the hereditary factor, the environment factor, the disease factor and the stress.

In the medical practice, we frequently confront with patients who do not dispose of a language capable of reporting their emotional feelings. Very often, these patients minimize their anxious disorders or the experienced depressions. Such patients justify their psychical reaction by relating it only to the somatic issue and this makes them difficult to be recognized as an anxious or depressive patient. Focusing the depressive or anxious symptoms on the somatic component was named somatization.

The results of the research emphasized the following personality features of the patients with psychosomatic diseases, which also include the coronary patient:

Choosing certain threatening significations regarding the individual's mood - a feature that draws near to a certain type of basic anxiety associated to fatigability, somatoform disorders, such as: "frog in throat", weight in extremities or precoldialgia unsupported clinically/para-clinically.

- Very intense primary emotional reactivity. Anxiety is perceived as an undefined fear, under the form of panic attacks.
- Aggressiveness, most of the times embezzled towards oneself.
- Extreme tenacity and stubbornness.
- Diverse pains, paraesthesia in close relation with the variable anxiety. Regarding the cardiovascular system, the following are described: palpitations,

precordialgia perceived under the form of a sting or burn, while the heart is felt as "hanged by a thread".

susceptibility, vanity, egocentric tendencies.

Within this general profile of the coronary heart patient, the impact of the psychical stress factor occurs under the form of minor traumas, but with long term action or under the form of "situations without escape" [4,6].

Nowadays, the correlation of these manifestations perceived by the coronary patient with the biotypological categories is reconsidered as increasing the benefice of the therapeutic approach [6].

Today, special attention is paid to the behavioural pattern type A, which predisposes to psychical stress due to the demonstration of its correlation to the occurrence of the coronary heart disease in the patients belonging to this pattern [114,193]. This behavioural pattern may also be encountered in other psychosomatic patients (suffering from ulcer or asthma), what makes us consider that the patients belonging to this psychobehavioral type are true stresses collectors.

## Table 1. Behavioural pattern type A (according to Thorp) [1]

Personality of type A	Consequences of behavioural pattern type A
Excessive competitiveness Irritability Interiorized aggressiveness Obsession of time emergency Insecurity Thirsty of injustice revenge Target is the economic success Impulsive behavioural Unlimited wish for affirmation Continuous time dependence Social dissatisfactions	Anxiety Depression Frustration Capricious hostility Lack of soul peace Stress increased reactivity Two times more stress hormones as against the behavioural pattern type B Cardiopathies Weak immunity system Other psychosomatic diseases

The description of the personality features of the type A personality, as well as its behavioural consequences are mentioned briefly in the table above.

The future orientation of the medical sciences on the psychosomatic approach, capable of taking into account that an important part in coronary heart diseases is played by the psychical traumas, together with the constitutional factors and the type of reactivity to the disease, would improve the efficiency of the applied therapy. This orientation would guide to a reassessment of anamnesis, of the examination and implicitly of the administration of the therapy in these patients.

The objectives involved in examining the psychosomatic patient aim at:

- creation of an environment of psychical comfort, by eliminating the psychical-dependent psychical stress factors,
- upon the establishment of the diagnosis, the reactions and attitudes of the patients will be recorded, as well as the type of personality; the biographic context for

the disease occurrence will be analysed, as well as the hierarchization of the involvement of the psychical factor in symptoms genesis.

- simple supportive psychotherapy will be initiated during the examination.

Also, surprising the individual in its integrity is characteristic for the primary care medicine. Recognizing the particularities and the engagement in a certain typology or constitution is specific only to homeopathic medicine [2].

The typological, constitutional classification represents the doctrine and therapeutic foundation of any homeopathic doctor. The typology refers to the most characteristic data, typical for the patient and the necessary remedy. The typological remedy is of large profoundness, being applied in case of chronic diseases, as well as in coronary heart disease [3,5]. Holding such competences by the family doctor allows him to recognize the biotypology and the reaction capacity regarding the disease. This increases the arsenal for the therapeutic approach.

Coronary heart disease enters into the category of the psychosomatic maladies and each individual reacts under the influence of the same determinant factors regarding the issue (heredity, disease, stress, environment factor).

Recognizing the psychobehavioural type A, of the constitutional type considered as a determinant factor of the susceptibility to the coronary heart disease and of the individual reaction to the therapy could be assimilated by the family doctor with homeopathic training.

Classic coronary heart disease doubled by this homeopath therapy remits the symptoms of anxiety, depression, optimizing the quality of life of the patient suffering from this affection, through this holistic way of therapeutic approach.

## BIBLIOGRAPHY

- 1. Iamandescu I.B Psihologie medicală, Ed. Infomedica 1997, 107-271;
- 2. Jurj Gheorghe Breviar de Homeopatie. FarmaMedia 2005;
- 3. Lockie A Encyclopedia of Homeopathy. DK Publishing, July 2006;
- McCaffery JM, Erasure-Smith N, Dube MR et al. -Common genetic vulnerability to depressive symptoms and coronary artery disease: a review and development of candidate genes related to inflammation and serotonin. PsychosomMed. 2006, 68:187-200;
- Onofrei Rodica Maria Medicina Integrativă, Congresul National al Medicinei de Familie, Craiova, Noiembrie 2003;
- Whooley A. Mary Depresia si bolile cardiovasculare. "Să vindecăm inimile frânte"; JAMA, 2006; vol. 4, nr.5, pag. 387 – 393;