Diagnosing Schizophrenia through Hand Analysis

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Abstract: Schizophrenia is a mental disorder often characterized by abnormal social behavior and failure to recognize what is real. Main objective of this review is to diagnose an illness at its first stage or before it's spreadout by combining scientific and classical knowledge. Here I want to present the method of diagnosing the illness like schizophrenia. Multi-Perspective Palm Reading system is used for this entire research work. Obtaining the handprints of the people with such ailment and examine them. After examining, all hand signs are divided into perspective levels of Multi-Perspective Palm Reading system. In addition to this hand signs are ranked by Log Odd Ratios. Finally we can sort out of major hand signs of indicating schizophrenia. As a result of this I confirm that hand can be used as an instrument in order to diagnose illness. In conclusion I emphasize the fact that prevention is better than cure. I further confirm that good humor and cure should continue in this world as a living condition with the power of medical science combined with palmistry.

Keywords: Multi perspective palm reading, schizophrenia.

I. INTRODUCTION

Schizophrenia is a complex mental disorder characterized by abnormal social behavior and failure to recognize what is real (typically manifesting as: delusions, hallucinations and disorganized speech), which is typically featured with 'minor physical anomalies' combined with 'neurological soft signs'. According Multi-Perspective Palm Reading schizophrenia is described to become manifest in at least 4 out of the 5 major perspectives of the hand (key-words for the 5 major perspectives are: function, proportion, skin, palm & fingers; the role of the *proportion* perspective is least obvious in schizophrenia). Here I present an overview of 47 individual hand signs significant for schizophrenia. Here I want to present the method of diagnosing the illness like schizophrenia using this Multi-Perspective Palm Reading system.

II. METHODOLOGY

Multi-Perspective Palm Reading system is used for this entire research work. Obtaining the handprints of the people with such disease and examine them. After examining all hand signs are divided into perspective levels of Multi-Perspective Palm Reading system. In addition to this hand signs are ranked by Log Odd Ratios. Finally we can sort out of major hand signs of indicating schizophrenia. As a result of this I confirm that hand can be used as an instrument in order to diagnose illness.

III. RESULTS

The hand sign statistics reported in this research indicate that schizophrenia usually tends to become manifest at 2 minor levels: the skin-related level of the (major) lines/flexion creases & the function-related level of the hand motorics. Additionally, a minor role is often seen regarding multiple abnormalities at the level of the finger shapes and/or the dermatoglyphics. The hand zones that typically get involved are: the fingertips & the pinky finger; for the palm no specific zone is more significant than the others.

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TOP 5 HAND SIGNS IN SCHIZOPHRENIA

- 1. Back of hand: total lack of expression [S. hand sign 1-2: LOR = +4.22]
- 2. Excessive secondary creases [S. hand sign 4-6: LOR = +3.40]
- 3. Palmomental reflex [S. hand sign 7-4: LOR = +3.15]
- 4. Pinky: immobility (ankylosis) [S. hand sign 7-1: LOR = +3.02]
- 5. Thumb: weak to total lack of expression [S. hand sign 3-3: LOR = +2.77]

How to make a Palm Reading Assessment for Schizophrenia?

The following guidelines should by principle solely only be applied to the hands of persons who exhibit psychotic symptoms in thought, emotion or behavior that are associated with schizophrenia

Key-elements of the hand in schizophrenia in a nutshell: in general a slightly narrow hand featured with a lack of 'expression', plus a slight tendency towards typically 'feminine' characteristics can be described to represent a typical feature regarding the impression of the full hand. Additionally, fingers & palm usually display a-typical features which are most likely to manifest visually in specific at: the fingertips, the pinky finger & the major lines/dermatoglypics of the palm. Nearly it always combined with a-typical features in the hand motorics.

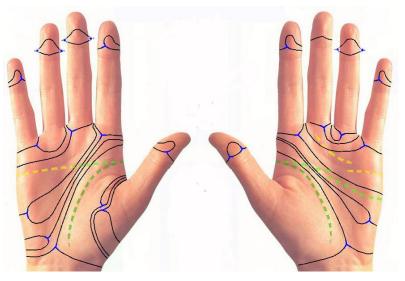


Figure 01: Schizophrenia & the hand: phantom picture

A positive diagnostic hand-assessment for schizophrenia [S.] requires a person to have all four requirements (no.1-4) listed below:

-S. REQUIREMENT no.1: The person requires having significant hand signs for schizophrenia in 4 of the 5 major perspectives of the hand, including: function, skin, palm & fingers.

- **D.S. REQUIREMENT no.2:** The person requires to have at least 1 of the 7 hand signs that relate to the (major) lines [= level 8] + at least 1 of the 7 hand signs that relate to the hand motorics [= level 2].

- **D.S. REQUIREMENT no.3:** The person requires to have at least 1 of the 13 possible hand signs that relate directly to the fingers [= level 5] + at least 1 of the 10 possible hand signs that relate to the fingertips [= involving level 5, 7, 8, or 9].

- D.S. REQUIREMENT no.4: The person requires having at least 5 out of the 47 listed hand signs.

IMPORTANT: Only when all above REQUIREMENTS are fulfilled, then one can speak safely of 'confirmed' hand diagnosis for schizophrenia

Some of the 47 significant hand markers for schizophrenia that are listed below became known in medical science as a 'physical minor anomaly' (such as: the *simian crease & Sydney line* regarding the lines/flexion creases, and *clinodactyly* regarding the fingers/digits); additionally, all 7 hand signs listed for minor level 2 represent 'neurological soft signs'.

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In general all these individual visual & motoric hand signs can usually be described to represent harmless body characteristics when found in isolation; however, combinations of visual & motoric hand signs can be recognized to bare high significance.

- List of 47 hand signs for schizophrenia -

1st major perspective: Function:

• Level 1 - HAND BEHAVIORS in schizophrenia:

1-1: Decrease in expressive gestures (coverable hand gestures).

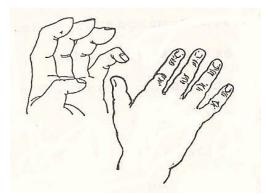


Figure 02: inward bent fingers

• Level 2 - HAND MOTORICS in schizophrenia:

2-1: Atypical handedness.

2-2: Pinky: immobility (ankylosis);

- 2-3: Impaired hand movement;
- 2-4: Impaired finger coordination;
- 2-5: Postural tremors, hands;
- 2-6: Palmomental reflex;
- 2-7: Palmar grasp reflex.



Figure 03: Postural tremors, hands

2nd major perspective: Proportion

• Level 3 - HAND SHAPE in schizophrenia:

- 3-1: Conic hand shape: long & narrow;
- 3-2: Back of hand: total lack of expression;



figure 04: palmar grasp reflex

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• Level 4 - PALM SHAPE in schizophrenia:

4-1: Relatively small Mount of Venus (thenar hypotrophy).

• Level 5 - FINGER SHAPES in schizophrenia:

5-1: Tapering/tapered fingers;

- 5-2: Spatulate fingertips;
- 5-3: Small distal phalanges (microphalangia);
- 5-4: Nail phalanges: ring finger >> middle finger (>3%).
- 5-5: Thumb: weak to total lack of expression;
- 5-6: Thumb: small + short;
- 5-7: Thumb: extraordinary long (above 2nd knuckle);
- 5-8: Index finger: extraordinary long (equal or longer than middle finger);
- 5-9: 'Female' finger ratio (*2D:4D digit ratio* > 1);
- 5-10: Middle finger: proximal inter phalangeal joint poorly defined;
- 5-11: Pinky: curved inwards (clinodactyly);
- 5-12: Pinky: extraordinary short;
- 5-13: Pinky: extraordinary long.



Figure 05: Photograph of right hand showing clinodactyly



Long pinky finger (in terms of both absolute & relative development)

Short pinky finger (in terms of both absolute & relative development)

Figure 06: overall development of pinky finger

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3rd major perspective: Skin

• Level 6 - SKIN RELATED QUALITIES in schizophrenia:

6-1: Nail fold: visible nail fold plexus (subpapillary plexus);

6-2: Skin: red/blue colored + cold.

• Level 7 - FINGERNAILS in schizophrenia:

7-1: Nails: small & underdeveloped (rudimentary);

- 7-2: Nails: excessively curved outwards (hyperconvex fingernails);
- 7-3: Nail middle finger: eponychium growth over lunula.



Figure 07: Hyperconvex nails

• Level 8 - DERMATOGLYPHICS in schizophrenia:

- 8-1: Fingers: fingerprint type asymmetries (at least 3 out of 5 fingers);
- 8-2: Fingers: extra limiter triradii;
- 8-3: Palm: ridge dissociation ('string of pearl type').
- 8-4: Palm: whorl or multiple loops on hypothenar;
- 8-5: Palm: multiple triradii on the hypothenar;
- 8-6: Palm: pattern on the mount of venus / mouse thumb (*thenar*);
- 8-7: Palm: pattern on mount of mars;
- 8-8: Palm: missing c triradius / merging of triradius b and triradius c;
- 8-9: Palm: abortive c line;
- 8-10: Palm: large ab ridge count fluctuating asymmetry: [LABRC-RABRC] > 5.



Figure 08 :Pattern on thenar



Figure 09: whorl on hypothenar

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Figure 10: Dissociated ridges

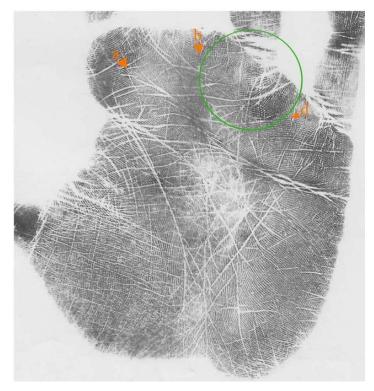


Figure 11: missing-c-triradius

In a lower right side of the green circle featured with a vestigial pattern, because technically a true triradius and looping ridges are missing.

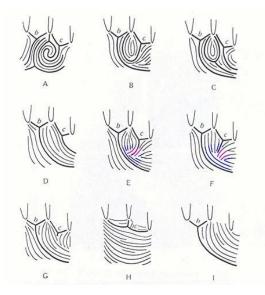


Figure 12: diagrams of various ridge arrangements and digital triradii in the interdigital areas.

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A - Whorl / B - Loop without an accessory triradius / C - Loop with an accessory triradius

D – Open field / E – Vestige with a tendency toward a loop / F - Vestige without a tendency toward a loop, abortive main line C

G - Open field, abortive main line C / H – interdigital triradius replacing two usual digital triradii / I – Open field, missing digital triradius C

• Level 9 - (MAJOR) LINES in schizophrenia:

- 9-1: Simian crease;
- 9-2: Sydney line;
- 9-3: Short head line;
- 9-4: Broken head line (broken proximal transverse crease)
- 9-5: Broken heart line (*broken distal transverse crease*)
- 9-6: Indistinct / fragmented primary creases;
- 9-7: minor lines: Excessive secondary creases;
- 9-8: minor lines: Chaotic arrangement of secondary creases.

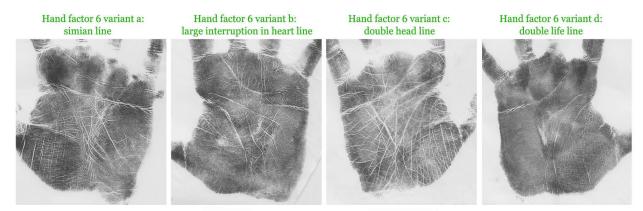


Figure 13: primary-lines-abnormal-path-variants

4th and 5th major perspectives: Palm and Fingers

The major perspectives 'PALM' & 'FINGERS' can be derived separately from the first three perspectives (= function, proportion & skin).

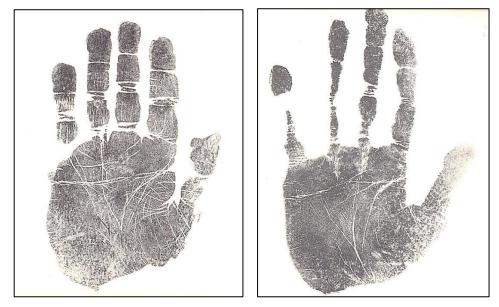


Figure 14: Schizophrenia & the hand: case study 1 / Figure 15: Schizophrenia & the hand: case study 2

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IV. DISCUSSION

Examining all hand signs is useful to diagnose an illness at its first stage or before it's spread-out. Log odd ratios are showing the possibility of getting illness. For example if log odd ratios are showing high value then possibility of getting diseases also high. Lines, color, texture...etc. of the hand are changing with time except skin pattern. As a result we can see the healing improvement of the disease through hand. Apart from these if a person has many diseases or having this ailment as hidden disease, then these hand signs are helpful to diagnose it very well. *Notice: through my various research works I have noticed that this schizophrenia mental ailment can be seen in many criminals in maximum and minimum contrasting levels.*

V. CONCLUSION

The review has covered the scientific studies of the palm reading. Hence this article will be useful to those researchers interested in validating the hidden truth which has not been scientifically validated. Presently there is an increasing interest worldwide in medical palmistry. I hope this research will help to prevent or control ailments as they are diagnosed in early stage.

ACKNOWLEDGEMENTS

First of all I express my heartfelt gratitude to Hand researcher and psychologist Martijn van Mensvoort who introduced Multi-Perspective Palm Reading system in 2011. In this research paper I would like to introduce a new concept combining my own experience in palmistry with the principles led down by Martijn van Mensvoort in the theories of scientific hand reading. I would like to thank Prof. H.M.D.R. Herath (Head of the Department, Department of sociology, University of Peradeniya, Sri Lanka) for his most support and encouragement.

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