

# An Emotional Plague Attack

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Discussion of the emotional plague often centers on the emotional plague character. This is understandable given the widespread havoc these characters cause on the social scene. It is easy to forget Reich's observation that the emotional plague reaction is a part of everyday life and that everyone is susceptible to having such a reaction if the right circumstances are present. The following incident illustrates how normal, everyday people can exhibit plague behavior under stressful circumstances.

Michael was a 17-year-old young man whose mother brought him to the emergency room at our hospital after teachers at his school complained that he was preaching about God and handing out flyers accusing the government of bizarre conspiracies. Initially, Michael was cooperative, but at one point during his interview he became frightened and agitated, and ran out into the emergency room waiting area where he took off all his clothes, stood on top of a desk and began calling on God for assistance.

Michael was admitted to the adolescent psychiatric unit under my care and shortly thereafter I met with his mother and her fiancé to obtain Michael's history. His mother told me that Michael had experienced a similar but less dramatic episode about a year before. After several weeks, this first episode had resolved without treatment. Toward the end of the interview, I told her that one possibility was that Michael could be developing schizophrenia. A distinct chill came over the room, and the mother, who had been anxious but cooperative, became antagonistic and suspicious. With some effort I was able to reestablish contact with her and explained the course of treatment that I recommended. When she left I felt we had reached an understanding, but over the course of the next few days I became

aware that Michael's mother was exhibiting some behaviors that were destructive, not only to Michael and his treatment, but to the functioning of the entire psychiatric unit. I was told she was contacting members of the hospital staff and arguing with them about my diagnosis and treatment of her son. First, she insisted that megavitamin treatment would be more appropriate; later she accused me of missing the diagnosis of Lyme's disease, despite a recent negative titer for that illness. She never said these things to my face. Instead, when I spoke with her on the phone, she was pleasant and rational. I only heard of her irrational accusations indirectly, when I met with the staff each morning to plan the day's treatment. I called the mother and arranged a meeting with the staff which she sabotaged in a most unusual way. On the evening prior to our meeting, she visited her son in the hospital. During the course of that visit her son was allowed to use a pair of scissors to cut open a necklace that he had made for himself during a recreation period earlier in the day. The mother became extremely agitated that her son had been given scissors, despite the fact that this was done under staff supervision and that he had never expressed any thoughts of wanting to harm himself. The next morning the mother did not appear for the scheduled meeting and when I telephoned her about this, she insisted that the staff member involved in the incident the night before had told her that the meeting was canceled. She became livid and insisted that I dismiss the staff member immediately, and began making accusations about other members of the staff. Her behavior was beginning to disrupt the functioning of the entire psychiatric unit, so I arranged for her to talk to the chairman of the department of psychiatry to review the complaints she was making against the staff. She did call him but instead of using the call to discuss her complaints, she used it as an opportunity to criticize my clinical judgement, and to insist on a second opinion from the chairman. I readily agreed to this, thinking that a second opinion might bring the mother back to her senses, as well as be reassuring to

the staff on the psychiatric unit. The next morning I was shocked when I read the chairman's report. He entirely ignored the problem, which was the mother's perceptual distortion and behind the scenes lies and manipulation, and instead concluded that a small increase in the dosage of Michael's medication was necessary.

My relationship with the staff had always been warm and collegial. Now this began to change. Staff members began to act distant and defensive. Some of the staff began to avoid talking to me and avoided eye contact. I called a meeting to discuss the problem. They appeared to agree with my explanation, but their attitude remained aloof. One even implied that *I* was the cause of the problem. No one voiced any open criticism, but I could see it in their reaction to me and in their manner of speaking. I felt isolated and alone. I asked myself "How could one woman's craziness disrupt an entire organization, an organization of mental health professionals that had previously functioned in a rational and effective manner?" The answer then came to me: the emotional plague.

Fortunately, at this point Michael began responding to treatment. His psychosis resolved rapidly and completely. His mother stopped her provocative and manipulative behavior. She attended a meeting and helped to plan Michael's discharge in a rational and effective way. The staff also changed in a sudden and remarkable way. The avoidant and critical attitudes vanished and people returned to being their usual friendly and helpful selves. I brought up the incident at a staff meeting the next morning, but no one seemed interested in talking about their experience—everyone acted as if nothing unusual had happened. The chairman disappeared into his office.

This episode illustrates a number of aspects of the emotional plague reaction. *It can affect ordinary people in everyday life.* It can come on suddenly under the right conditions. In this case it appears to have been provoked by contact with the truth; i.e., that Michael's symptoms could represent the onset of schizophrenia. *It is contagious.* What started out with the mother spread to the staff and eventually included

the chairman of the department of psychiatry. My personal experience confirms the observations of Wilhelm Reich, M.D., that when attacked by the emotional plague one feels, and in fact most often is, isolated and alone and should not expect help from coworkers or from authority.