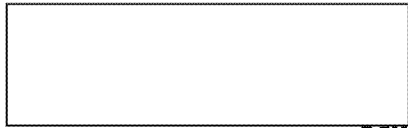


Vocational Rehabilitation
State of Florida
July 8, 1964



PSYCHOLOGICAL EVALUATION

This subject has been seen three times at the Psychological Service Center. On April 9, 1964, we had a long interview with him in which he explained the history of his seizures. On June 11, 1964, he received the TAT and a Free Association Test, using a list of words that was especially prepared for him. On that date, he promised to come back to bring a list that he had made of all his seizures since September 1962 up to the present time, with an indication of the emotional problems that he had on the days he was sick. This list was brought, by him, to our office on June 30, 1964.

Reason for Consultation

To try to determine if there were any psychological factors influencing this subject's epileptic seizures.

Results of Psychological Investigation

In a case such as this, it is obvious that organic factors are the main determinant of the patient's disease, but from the interview and the tests, we received the impression that the patient's emotional state has often played a certain role in triggering his epileptic seizures. Psychotherapeutic treatment that would enable this patient to gain better control of his emotions would obviously be highly beneficial for him.

Intelligence

This subject was not formally tested in order to determine his I.Q., but from his conversation and from his responses to the personality tests, it is quite clear that he is a man endowed with a superior intelligence, although some impairment has necessarily resulted because of his frequent epileptic seizures, and, recently, because of his brain surgery. He was not tested for intelligence because it was not feasible to do so since his operation had been done just a few weeks ago and the possibility of some transient effects of the surgical procedure might still influence any results. However, from a strictly clinical viewpoint, when comparing the subject's reaction before and after the operation, the amount of impairment produced by the operation does not seem to be really considerable, and, on the other hand, there is a remarkable decrease in his anxiety.

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Dynamics

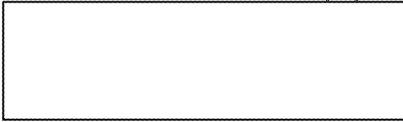
When this patient was 12 years old, the neurological disease that he had been having for years, began overt epileptic seizures. At this time, the main psychological conflicts of this patient were centered around his mother. He had strong ambivalent feelings toward her. She was loving and kind to him, but at the same time domineering and over-protective. The first epileptic seizure of the patient took place after an argument with his mother who threatened to scold him.

When the subject was 16 years old, he started treatment which was successful for eleven years. Unfortunately, when he was 27 years old, at a time that he was fighting against Batista's dictatorship, he was identified as a conspirator and sent to jail. There he was beaten by the police or guards in a really savage way and this was the beginning of a new stage in his life in which he frequently suffered from epileptic seizures. It is important to point out that this began when the patient was the object of an unjust aggression by authority figures.

Among the most important psychological conflicts of the patient at the present time, we notice the following:

- a) The separation from his parents. It is obvious that the subject has still strong ambivalent feelings toward his parents and especially toward his mother. He hates her over-protectiveness and domineering attitudes, but at the same time, he feels sad about the separation from his family.
- b) The idea of being limited in life because of his epilepsy. This problem was very deeply felt by the patient since he was a child, because at that time his mother used to restrain him from having a normal boy's life due to the seizures. He was considered as a boy with a very bad temper and "seen sometimes by his neighbors as some sort of a devil". This means that the patient developed very strong aggressive tendencies as a reaction to this frustration. At present the patient feels that there are many goals in life that he will never be able to reach because of his disease. For instance, concerning a profession and a superior education.
- c) The patient has had some failures in love which were very frustrating for him. He has never been formally engaged and when he approaches a girl he always has in mind the idea that he cannot feel well with a woman that would pity him for his disease.

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- d) For several months the patient has had a common-law wife, here in Miami, but it seems that he has never been deeply in love with her. It is rather a matter of sex and companionship. Nevertheless, he often argues with her because she is a domineering person, who "wants to be a mother for him". Some of the patient's recent epileptic seizures took place after an argument with her.
- e) The political situation in Cuba is another source of suffering for the patient, as it is for all Cuban exiles. It is, however, important to note that the patient's reactions to Batista and Castro's dictatorships were not only the result of his patriotic feelings, but also the expression of his deeply rooted aggressiveness against all forms of unjust or unreasonable authoritarian behavior.

JIL:rb

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