CHAPTER IV
OBJECTIVES AND RELEVANCE

FUTURE DIRECTIONS IN RESEARCH ON PERSONALITY

PREVENTIVE MEASURES
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The present investigation exploring the relationship between personality factors and patients of Cataract, Glaucoma and Retinal detachment is likely to be very relevant, and meaningful in underlining the high risk group, for developing these diseases. Intervention programmes including anxiety release, management training, behavior therapy, cognitive behavior therapy, psychotherapy, biofeedback, relaxation training and group support have been remarkably successful and stable in modifying the stress related physical ailments and abnormal personality patterns.

Thus early identification and intervention may increase the success rate of modifying the personality factors which may be more pathological if the individual persists in his behavior pattern. The present study being conducted in patients is a step in this direction.

Future Directions in Research on Personality

Longitudinal research is needed to determine clearly whether personality is related to particular illness outcomes, including separate investigations of onset and illness course. Everything we know about psycho physiological influences on health and illness suggests that personality effects, to the extent they exist, are potentiated by stress. This means that further work is needed to trace out the ways in which stress exposure combines with particular personality characteristics to decrease host
resistance to illness. As the preceding review shows, we currently lack so much as a clear description of the interactive influence of personality and stress in predicting most kinds of illness. It is likely that such investigations will find two main pathways: personality influences on appraisal of situations as stressful; and personality influences on ways of coping. While it is unlikely that interventions aimed at modifying fundamental personality characteristics will be successful, attempts to manipulate appraisals or to channel coping efforts are feasible. Efforts to link personality characteristics to these intervention targets could be important in at least two ways. First, they could help to pinpoint stable person characteristics that are risk factors for particular kinds of cognitive and coping reactions which can be intervention targets. Second, they could help determine the range within which interventions are feasible.

Preventive Measures

The present research alongwith the dynamic factors of personality is more concerned with the preventive measures against the formation of Glaucoma, Cataract and Retinal detachment condition. The personality factors identified at an early age may be controlled by sensitivity training programmes or psychotherapeutical aids which may prevent the eye disease conditions at the later age.

In the present study, the main postulates are no disease in purely physiological, many other factors play a role in the causation of a particular disease condition hence physical illness
can no longer be studied apart from psychological factors. The psychological factors can be:

**Personality**: It is a very important factor in the causation of most disease conditions. Some personality characteristics tap the individuals vulnerability to stress or some conscious and unconscious motives and conflicts or emotional upset. Neurotics are inherently fragile emotionally, other personality characteristics are important because they influence primary appraisal or interpersonal dependency, it is thought to magnify the impact of interpersonal loss on health, because for dependent individuals, loss is a particular threatening. There are particular personalities which predispose people to particular illness. For e.g. Cancer prone personality; arthritis prone personality; cardiovascular disease prone personality etc. Neurotic personalities are more prone to coronary heart disease and hypertension.

**Somatic Conditions**: These are also very important in the causation of any disease condition. Somatiform disorder results from psychological conflicts that take on a physical form, the major three forms are hypochondriasis, somatization disorder and conversion disorder. Hypochondriacs while physically healthy are convinced that they are suffering from some disability or are about to contract some dread disease. People suffering from somatization disorders are bothered by numerous physical symptoms, for which, no organic cause can be found.
in conversion disorders, formally called hysteria, people suffer the actual loss or impairment of some motor or sensing function disorder, that are neither faked nor supported by medical evidence, it is agreed that conversion disorders result from some psychological conflict, but studies indicate that many apparent conversion disorders are really organic brain disorders in their early stages, in either case, there is no organic evidence to explain the symptoms while there is evidence that the symptom is linked to psychological factors.

Psychophysiological or Psychosomatic disorders are influenced by emotional factors. Over the years physicians repeatedly noted a connection between certain disorder, such as ulcers and high blood pressure and psychological tension. Only recently it was discovered that physiological functions such as blood pressure and heart rate, could be controlled voluntarily. Psychological factors play a role in cancer, infections and many more diseases which were considered organic earlier. These diseases are ulcers, obesity, essential hypertension, headache, asthma and insomnia.

An important aspect of this research venture will be to study the personality of 130 patients of Cataract, Glaucoma and Retinal detachment. This phase of investigation will undertake to determine, whether there are any similarities in the profiles of the eye disease patients and other psychosomatic or psychophysiological psychoties and neurotic groups on basis of reference data available at international and regional level. Differential correlates of personality traits, in common eye disease patients and profiles of other groups if any would be very relevant and
meaningful in indicating directions for the future research.

Under these conditions, the present research is an attempt to work with the following objectives:

1. To study the personality factors in patients of common eye diseases namely Cataract, Glaucoma and Retinal detachment.
2. To compare the personality factors related to each eye disease under consideration.
3. To prepare the personality profile to trace the high risk, eye disease patients.
4. To compare the personality factors related to eye diseases in relation to various age groups.
5. To study and compare the personality factors of eye disease patients in relation to other psychosomatic groups based upon available reference data from international/regional level.
6. To study and compare the personality factors of eye disease patients with general population based upon availed reference data.