# Psychiatric aspects of the phenomenon of stigmata

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### Abstract

A stigma is a notion used in some religions to describe the wounds which were symbols of a special relationship to God. The phenomenon is known in Christianity (the wounds corresponding to Christ's wounds in His forehead, hands, feet and side) and Islam (the wounds corresponding to those of Mohammed that he suffered during his battles). Stigmata were the reason of lots of controversies, especially those concerning their authenticity and the ability of their bearers to control them. In the article I would like to refer the phenomenon of stigmata occurrence to the interpretation suggested in the subject literature – in terms of dissociational or controversial phenomena.

Keywords: stigmata, dissociational disorders

#### Streszczenie

Stygmat jest to określenie stosowane w niektórych religiach do określenia ran będących symbolem szczególnego związku z Bogiem. Zjawisko znane w chrześcijaństwie (rany odpowiadające ranom Chrystusa na czole, dłoniach, stopach i boku) i islamie (rany odpowiadające ranom Mahometa odniesionym przez niego podczas bitew). Stygmaty były przyczyną wielu kontrowersji, głównie dotyczących ich autentyczności oraz możliwości kontrolowania przez naznaczonego. W artykule tym chciałbym spróbować odnieść zjawisko pojawiania się stygmatów do sugerowanej w literaturze przedmiotu interpretacji w kategoriach zjawisk dysocjacyjnych czy też konwersyjnych.

Słowa kluczowe: stygmat, zaburzenia dysocjacyjne

# Introduction

A stigma is a notion used in some religions to describe the wounds which were symbols of a special relationship to God. The phenomenon is known in Christianity (the wounds corresponding to Christ's wounds in His forehead, hands, feet and side) and Islam (the wounds corresponding to those of Mohammed that he suffered during his battles). The wounds may be bleeding all the time, they do not heal, but they do not fester either, in spite of the lack of sterility, and after the stigmatic's death they often vanish. The believing Christians see the phenomenon of stigmata as visible signs of Christ; the skeptics take them as self-mutilation or else as a brain disorder [1]. The Medical Encyclopaedia mentions the symptoms consisting in the appearance of skin problems of a trophic or vascular character (blisters, bubbles, extravasations),in the places corresponding to Christ's wounds suffered during His passion" [2]. As the Encyclopaedia further states, stigmata appear in case of religious fanatics, most often people with a hysterical personality. On the other hand, doctors define the phenomenon as "marks on one's skin - usually bleeding wounds or bruises, often with a religious or personal basis -which can appear as a result of a certain emotional state [3].

Stigmata are accompanied by a sharp pain suffered – often for many years – by those who bear them. Sometimes there can be blood tears or blood sweat and depart

tures from the regular metabolism - such as abstaining totally from food or sleep. The man who bears such wounds is called a stigmatic. The most widely known stigmatics were St Francis of Assisi or St. Pio of Pietrelcina. In some cases stigmatics also had mystical and charismatic experiences (ecstasy, clairvoyance, levitation, the gift of languages or conscience permeation). The most famous stigmatic of the 20th century - father Pio - was ascribed the ability of bilocation, i.e. appearing in two different places at the same time. Those blood phenomena and mystic experiences were more intense on the days when the Church worships especially Christ's passion and death; on Fridays, on the day of the Holy Cross and especially in the Holy Week. Stigmata can be visible or hidden, as it was in case of the saints: Catherine de Ricci or Catherine of Siena.

Stigmata were the reason of lots of controversies, especially those concerning their authenticity and the ability of their bearers to control them. Christian theologians mention 5 criteria which are indispensable to regard the blood stigmata as authentic:

- Characterized by the alterations of body tissue in the places of Christ's wounds (or at least as it is presented in Christian tradition),
- They appear rapidly and spontaneously,
- They do not rot or fester, they often emanate a sweet smell like that of flowers,

- They bleed with artery blood, they do not heal often for months or even years,
- They stay unchanged after medical treatment.

In the article I would like to refer the phenomenon of stigmata occurrence to the interpretation suggested in the subject literature – in terms of dissociation or controversial phenomena. It is intriguing that we do not encounter even similar phenomena in everyday psychiatric practice. An inspiration for this article was a visit of a presently known stigmatic- Myrna Nazzour of Syria- in Lublin, in August, 2011.

The psychological mechanism of the origin of stigmata is usually understood as the "psychological mutilation". A stigmatic would be able to influence his/her own body with the power of his/her imagination and strong emotions. The sick person is under such a strong influence of the image of Christ's passion that it affects him/her physically by means of self-suggestion. It would concern the personalities with hysterical traits.

It would be a certain form of hysterical conversion, i.e. generation of real or simulated physical indispositions by the sub consciousness of the hysterical personality in order to justify abstaining from activities or turning his/her attention away from unfavorable thoughts or feelings. The symptoms of such a conversion may be provoked or removed through hypnotic suggestion. There is also a possibility of a more conscious provocation of indisposition symptoms, their simulation and "switching them on" or "off" (e.g. vanishing of the symptoms "during prayer").

The classically understood hysterical conversion could be matched only with several forms of stigmata, those without physiological changes, concerning in suffering pain in the "holy places". Hysterical conversion is, e.g. pain or inertia without any possibility to find the somatic reflection of the physiological phenomenon. Stigmata, which are connected with wounds and bleeding, are described by some people as a variety of a religious illness with a psychosomatic character.

# The Myrna Nazzour phenomenon

Myrna Nazzour claims to have seen Our Lady on December 15, 1982. She was praying together with a group of the faithful. Then in a certain moment she lost contact with the attendants, and her body was covered with an oily substance. A moment later she lost her consciousness thoroughly. Three days later the revelation recurred but this time Our Lady spoke to her. On 12 January 1983 Myrna saw Jesus Christ too. Jesus and His Mother revealed her their messages.

On 26 October 1983 the visionary received stigmata on her hands and face. Since that day they have appeared from time to time. She had them in the Holy Week of 2001 lately. As far as the phenomenon of oil is connected with

the tradition of the Christian East, the stigmata received by Myrna are only known in the western Church. They could be seen for the first time on 25 November 1983, around half past 4 in the afternoon. A Syrian lazarist (father Joseph Malouli), who was the only one present to have any knowledge of the phenomenon, called 8 doctors immediately and they held a scrupulous inspection of Myrna's wounds. They opened in an inexplicable way and they were healed in the same way, without any traces or scars about 11 pm.

As well as the phenomenon of oil the later stigmata were examined and observed by doctors, including a French neurologist – dr Loron. The doctor diagnosed the phenomenon in the following way: "Genuine wound, marked in a subtle way, with or without bleeding, the healing (without infection) of which does not demand any medical care.

The stigmata were also examined thoroughly in 2004 by a group of Scandinavian scientists guided by dr Knut Kvernebo from the University Hospital in Oslo. They excluded the possibility that the wounds originated in a natural way through hypoxia and erythromegalia [4].

### The psychiatric analysis of the stigmata phenomenon

One must admit that the phenomenon of stigmata has been examined rather scarcely because only several cases of stigmatization that were noted have been documented so as to be treated seriously from the scientific point of view. Besides, not all those cases are stigmata with a religious ground. Nevertheless, on the basis of the cases, specialists are prone to diagnose stigmata as a psychosomatic phenomenon: that means, the psychological condition of a man makes his organism react in a purely physical way. Stigmata - as well as the symptoms of hysterical conversion - may be provoked during hypnosis, ordering the hypnotized person to recall the reminiscences or thoughts that led to the origin of stigmata. It was to be a proof that a purely physical process can be engendered by a respective psychological state - the recollections of a traumatic experience connected with strong emotions. In case of the previously described cases of stigmatics the experiences are still alive - they have been contemplating Christ's passion and crucifixion for many years which is intensified by the iconography ever present in their environment. In order to state whether a given case is psychosomatic illness, two conditions must be fulfilled: firstly, the disorder is accompanied by the familiar, pathological somatic changes (in the case of stigmata they are wounds) and secondly - their appearance is preceded by events which are important from the point of view of psychology that could influence the appearance of the changes. Psychiatrists mention one more criterion resulting from the previous two - it is illness (stress) susceptibility (diathesis - stress model). The

term "diathesis-stress model" refers to the kind of weakness which is the basis of pathological somatic changes, while "stress" is connected with the psychological reaction to an event. Hence the conclusion that the wounds of a stigmatic appear when he suffers from a certain physical weakness and then the weakness is accompanied by psychological problems. Dependent on the kind of physical weakness it takes a smaller or bigger stress to cause the disorder. Susceptibility [diathesis?] may mean that one easily reaches ecstatic or mystical states.

A. Ludwig mentioned ten features which characterize the phenomena of trance and ecstasy: acceleration of the process of thinking, disturbances of the sense of time, the loss of control of reality, change of emotional expression, a disturbed feeling of one's body, perception disturbances, the changes of the way of thinking and changes of meaning, the ability to experience something inexpressible (a specific contact with nature and other people), a feeling of rejuvenation and over suggestiveness (and the direction of the disturbance is towards receiving impulses) [5] People who have stigmata often experience ecstatic states with the above mentioned features.

#### **Conclusions**

As is often stressed by the faithful, in case of stigmata not all can be explained in a scientific way. First of all, the wounds cannot be healed with the use of the medical methods (medicines). Secondly, contrary to 'normal' wounds, which do not heal for such a long time, the wounds of the stigmatics do not usually have an unpleasant smell, in fact they often have a nice smell (like those of St John of the Cross or Father Pio). To sum up – science (as to my knowledge, and to the accessible sources familiar to me) cannot find a comprehensive interpretation of the phenomenon of stigmata. Their occurrence testifies to the existence of the source of their origin – the vital faith in the passion of Jesus Christ.

#### References

- 1. http://pl.wikipedia.org/wiki/Stygmat
- 2. Encyklopedia Medycyny, PWN: Warszawa; 1982.
- Mitica A. Psychologiczna próba interpretacji zjawiska stygmatów. www.racjonalista.pl
- 4. Rosenham D.R., Seligman M.E.P. Psychopatologia. t. I, Warszawa: 1994.
- 5. www.charyzmatycy.pl
- Kokoszka A. Poznawcze, fizjologiczne i psychoterapeutyczne aspekty "zmienionych stanów świadomości". Psychoterapia, XLII, Kraków: 1982.

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