BELIEF IN OMENS AND SUPERSTITIONS AMONG PATIENTS WITH CHRONIC NEUROLOGICAL DISORDERS

Ruta Mameniskiene, Kristijonas Puteikis

Faculty of Medicine, Vilnius University, Lithuania

Background
Chronic neurological disorders may affect various cognitive processes, including superstitious belief. We tested whether superstitious beliefs are equally prevalent among patients with Parkinson’s disease (PD), multiple sclerosis (MS), epilepsy (PWE) and healthy controls (HCs).

Methods
We conducted an anonymous survey among outpatients and HCs by asking them to ascribe meaning or report belief for 27 culturally adapted statements (9 omens and 18 superstitions). The superstition index (SI) was measured as the sum of items respondents believed in. The SI was compared between groups and two-step cluster analysis was performed to discern different subgroups based on answers to the items of the SI.

Results
Among 371 respondents (152 PWE, 47 patients with PD, 71 with MS and 101 HCs), complete SI scores were collected for 312 (84.1%) and they were lower in patients with PD (n=29, Md=1, IQR=0-5) in comparison to those with epilepsy (n=127, Md=7, IQR=1-14), MS (n=58, Md=6.5, IQR=0-12) or HCs (n=98, Md=4.5, IQR=1-10), H(3)=14.431, p=0.002. The negative binomial regression model (n=289, \( \chi^2=26.323, p=0.001 \)) was adjusted for sex (OR=1.760, 95%CI=1.304-2.376), income (OR=0.954, 95%CI=0.807-1.128) and education (OR=0.942, 95%CI=0.851-1.043), and PD was the only disease associated with the SI (OR=0.531, 95%CI=0.296-0.953). Two-step cluster analysis classified individuals with PD grouped into “non-believer” and “semi-believer” groups rather than “non-believer” and “believer” clusters characteristic for PWE, patients with MS and HCs.

Conclusion
We suggest that individuals with PD are less prone to have superstitious beliefs than patients with MS, PWE or HCs. This could reflect a unique impact of PD on cognitive processes underpinning superstitious thinking.