following encephalitis (Rosner, 1942). Even here it was rare. In Jelliffe's exhaustive summary of all reported cases of oculogyric crisis after epidemic encephalitis up to 1928 there was not a single case of such an association (Jelliffe, 1929). In schizophrenia this association has not been described before Chiu's report. This may be because of the paradoxical association between a resumed drug-induced disorder and one of the symptoms the drug is supposed to treat. In the case I report, the oculogyric crisis has been previously noted but described as hysterical, just as were the earliest cases of oculogyric crisis after the onset of epidemic encephalitis.

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Caution about sorcery

SIR: Keshavan *et al* (*Journal*, February 1989, **154**, 218–220) discuss the role of sorcery in the aetiology of psychopathology in rural India. I would like to discuss a case which acts as a caveat when looking for such explanations in the illnesses of recent immigrants to the United Kingdom.

Case report: A 28-year-old married Ghanian lady was admitted with a 3-month history of increasing estrangement from her husband and a week's history of mutism and not eating. Her husband reported that they had had an arranged marriage in Ghana four years previously, but that his wife had not joined him in England until two years later. He felt their marriage to be happy and without problems.

On examination she was dehydrated, but also approximately 28 weeks pregnant. She was initially mute, and was only persuaded to eat and drink with great difficulty. A diagnosis of depression was eventually made and a course of ECT was given, to which she made a good response.

The lack of information about our patient encouraged speculation as to the role of specific sociocultural factors in the aetiology of her illness. We felt that there was particular significance in the fact that she would not discuss and then denied her pregnancy. We discovered that there are traditional Ghanian beliefs leading pregnant women to think of their forthcoming child as a danger to themselves both physically and spiritually. Risks are much greater if the husband is not the father of the child; it is said that "adultery spoils the pregnancy", and it is felt very unlikely that such pregnancies will be safely delivered (Field, 1960).

These ideas led us to consider illegitimacy and worries about the pregnancy to be of major aetiological significance. However, when discussed with the patient prior to the course of ECT they did not elicit any response. The successful resolution of her illness allowed the patient to tell us that such views were very old-fashioned and now rarely believed. The problems she faced were much better understood in the context of isolation, a difficult marriage, and feeling very homesick.

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Benign intracranial hypertension and repeated self-mutilation

SIR: It is surprising that a void exists in the literature concerning the subject of psychiatric morbidity and benign intracranial hypertension, other than mentions in passing of feelings of subjective tension and discussions of the mental impairment suffered in children with the disorder.

Case report: Miss A, a 23-year-old unemployed single mother living alone with her child, was first seen as an overdose referral, having been admitted to the General Hospital following ingestion of 20 temazepam tablets to "relieve" the tension in her head. A careful history revealed no ideational or biological aspects suggestive of depressive illness.

On reflection she felt that she had never been happy even as a child, and that although there had been no specific traumas in her early life she had been shown little affection by her parents. At the age of 15, apparently unrelated to any social difficulties at the time, she began to experience feelings of extreme tension which she found difficult to explain in detail, but described as being not exactly pain but more a feeling of pressure building up to such a pitch that she felt as if her head was going to explode. The only way in which she was able to relieve this tension was by self-mutilation, and over the three years between the ages of 15 and 18 she made repeated superficial slashes to her forearms and also clawed at her face on several occasions with superficial injury