

CASE 4

HISTORY

This 40-year-old, white, unmarried male, a native Virginian, had been received into the Colony for the second time just prior to the administration of this H-T-P. Between his two colonizations he had twice been at the Western State Hospital for treatment for alcoholism. He is the 4th of 7 children; the others are said to be "normal." His environment from the social and economic standpoints was definitely superior. His mother, however, was overly indulgent and protective, and successfully thwarted all the efforts of his father to prepare him to accept an adequate adult role. He graduated from high school in the usual period of time; spent several sessions at the University of Virginia. He has never been even remotely self-supporting. He says, "I was born a gentleman—only a fool would work." His behavior from life age 6 (at which time he is presumed to have had an encephalitis) has been progressively more and more asocial. His reaction to the death of his mother in 1929 was violent. After he threatened to kill his father, he was institutionalized. In recent years he has been chronically alcoholic whenever he has been outside an institution. It is evident that he has undergone definite organic deterioration. Diagnosis: Psychopathic personality (post-infectious), with asocial trends, with organic intellectual deterioration.

QUALITATIVE ANALYSIS I. Details

House: (1) The windows lack panes (hostility and possible oral and/or anal eroticism, P2). (2) The door and the steps were the last items drawn (reluctant contact, Pl).

Tree: (1) There is a deeply shaded area on the top of the left lower branch (the patient said on questioning that this symbolized the death of his mother, P2).

Person: (1) The mouth and the arms were the last items drawn (the hostilityexpressing modes were suppressed until last, Pl). (2) The Person is a "stick man" (aggression against the examiner and man in general, P2).

II. Proportion House: The door and the windows are too small in relation to the wall in which JOHN N, BUCK they appear (inaccessibility, and lack of interest in others, P2).

Tree: The Tree is small in comparison to the form page size (symbolizes his basic feeling of inadequacy, P2).

Person: The malproportion throughout the Person is general, obvious, and great (savage caricaturing of a fellowman, and, through him, of people in general, P3).

III. Perspective General: (1) The disorganization of the spatial relationship of the details illustrates the "segmentalism" of detail presentation which is almost never found in the absence of an organic disturbance. There are, for example:

- A. For the House: (1) the door placed far above the steps; (2) the door placed slightly above the windows ; (3) the roof—which is said to be covering the door—shown below the door; (4) the chimney suspended above the' roof; "(P3)"
- (B. For ithe tired; branches which never are attached to the trunk, and which are not always attached to each other (P3).
- C. For the Person: arms which are not attached to the trunk (P3).

(2) The House and the Tree are placed in the upper left corner (regression of concept and basic insecurity, P2)—one suspects that the Person would have been placed there, too, but for the fact that the Person—as it seems to do with so many psychopaths—produced a hostile,

aggressive reaction which permitted or engendered a different type of placement, Pl. V. Line Quality General: Poor control and excessive force were exhibited in all three wholes (evidence suggestive of organic damage, P2). VI. Criticality General: The marked diminution of the critical faculty is pathognomonic of organic disturbance, since the patient is obviously not psychotic (P3). VII. Attitude General: The subject expressed freely and frankly his wholehearted distaste for the entire task (as he stated elsewhere, "work" is abhorrent to him, P2). IX. Comments A. Drawing Phase. House: Mr. G's few comments made while he was drawing indicated a recognition of inadequacy, with some frustration at his inability to do better (organic impotence, P2). Person: While he was drawing the Person, the patient launched into a lengthy, highly irrelevant, but very well worded account of his trip to the New York World's Fair (the marked disparity between the concept quality of his verbal comments and his drawings in favor of the former suggests a major organic component, P2). B. Post-Drawing. House: Mr. G's comments reveal an inferior reality grasp (deterioration, P2). Tree: (1) He described his Tree as a delicate tree needing much personal care and attention (he feels that he deserves kindly and painstaking care by others; that a parasitic existence is his right, P2). (2) In answer to T7, and in justification of his statement that the Tree looked more like a woman than a man to him, he said, "The hair on top of the head or along under the arms and other places" (in a subject of his one-time undoubted intelligence and general cultural background such a statement suggests definite deterioration, P2). (3) The weather about his Tree was bitter cold, a wind of gale-proportions was blowing and would probably damage the Tree (the environment is cold, hostile, oppressive, P2). (4) While he was being questioned in the P-D-I he wrote Elberta under his Tree (pathoformically compulsive need to structure the situation, P2). General: His P-D-I was seasoned with many irrelevant spontaneous comments of considerable length (subject attempted to impress the examiner with his wide range of information, P1). C. Associations. House: Mr. G's House reminded him, among other things, of the many drinking bouts in which he had engaged (by degrading himself he aggressed against his family, P2). Person: His Person made him think, among other things, of a friend with whom he once fought and whose eyes he said he blacked, after which it was easier to distinguish the friend from the friend's twin brother (Mr. G. would like very much to be able to convince someone outside his family circle that he is physically dangerous. As a matter of fact he has had always to be protected from the other patients, P2). X. Concepts House: His House is a small tenant house on his father's farm, a house to which he has gone many times in the past to sober up (again he debases the family by selfdegradation, P2). Tree: The Tree is a peach tree, despite the fact that his father has nearly 10,000 apple trees (subtle expression of his freely verbalized feeling that he is not of the common herd, P1). Person: The Person is a friend in delirium tremens, shouting for beer, while the patient himself is standing to one side out of sight, also waiting for beer (the implication is that Mr. G. drinks like a gentleman. This represents, too, aggression against a man who is not, like Mr. G., in a hospital, P2). SUM MARY

Quantitative Analysis: At the time he attained these IQ scores on the H-T-P in the high imbecile-low moron range, he still had a Wechsler-Bellevue Verbal IQ of 94 (Performance IQ of 66). This disparity, in view of the obvious fact that the patient is not psychotic, strongly suggests organic deterioration. The almost uniform depression of scores for the disparate wholes and for perspective, proportion, and details, respectively, bespeaks definite and well-advanced organic deterioration. Qualitative Analysis: Evaluation of his H-T-P reveals the presence of the following characteristics which appear to be rather typical of the drawings of subjects who have undergone organic deterioration: (1) disorganization for all three wholes (the proportional and positional relationship of the details is badly distorted); (2) very inferior criticality ; (3) poor motor control; (4) the classical, small, tortuous, one-dimensional Tree; (5) strong feelings of violence and destructiveness ; (6) poor reality grasp. In addition, however, there are to be seen: (1) Sexual mialadjustment; (2) strongly hostile feelings toward other persons whom he holds in ill-concealed contempt (the verbal expression of which has frequently gotten him into real difficulty) 3 (3) inability to form lasting, responsible, sharing, affectional relationships; (4) hostility against his family so strong that he will even degrade himself if in so doing he can somehow degrade his relatives; (5) ideas of persecution; (6) delusions of grandeur. Impression: | Psychopathic _ personality (post-infectional) with asocial trends; organic intellectual deterioration (chronic alcoholism).