

Echopraxia: Very First Description of the Symptom Way Back in the 17th Century

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My first exposure to a patient exhibiting echopraxia was as a young medical student around five decades ago. As it was not mentioned in the then edition of *Hutchison's Clinical Methods*, I found myself completely at sea with absolutely no reference point. There was a patient, a 32-year-old librarian who was brought over by his brother. The family had noticed that he had suddenly taken to imitating other people's movements and actions so much so that he had to take leave off his otherwise satisfying job. He had no insight into his condition and just could not figure out why his colleagues at work as well as his family members found him embarrassing.

He would often mimic hand gestures of the other people in the room and occasionally attempt to walk in the same manner as they did. The malady progressively worsened to the extent that he started imitating actors he had just witnessed on television. On numerous occasions, he would violently kick at his family members after watching a television show which lead to some very serious injuries.

He was forcibly brought over to the psychiatric outpatients which is where I encountered him. As the symptom was new to me, I did a lot of reading in the library and was immensely helped by Dr. M. K. Govil, one of my teachers who had a special interest in neurobehavioral disorders. It was only then I learned that this symptom, apart from being found in psychiatric conditions like schizophrenia, autism spectrum disorders, Gilles de la Tourette's syndrome, and general paresis of insane (almost extinct nowadays), was not an uncommon feature in patients with epilepsy. Some au-

toimmune conditions, early stages of Alzheimer's disease, and rare culture-bound syndromes like latah, imu, and catatonia. And in almost always, patients with these symptoms are initially dismissed as malingerers. It, therefore, presents itself with a completely different set of challenges.

There was a paucity of medical literature on echopraxia in those days. I recall even asking one of my teachers why was it that no MD research had been attempted until then. The symptom itself had kindled my curiosity. Thankfully the situation has changed. The latest edition of *Brain's Neurology* has a separate chapter on echopraxia, and I note with satisfaction that the latest edition of *Hutchison's Clinical Methods* also provides valuable insights on the differential diagnosis one needs to entertain while encountering this symptom.

For the present lot of medical students who may have developed curiosity the way I did, I can certainly refer them to some very informative articles that have recently appeared.^[1-3] But even these do not address the question that crossed my mind as a medical student: who was the very first person to describe echopraxia?

While working on my doctorate in the history of medicine, I visited many libraries in several countries in Europe. And finally, I found the answer to my question, but the name in all probability would be unfamiliar to most medical practitioners including students of neurology. And it may amaze many that the symptom was first identified in the 17th century.

Here is the Fascinating History of Echopraxia

George Garden sent this communication to the recently constituted Royal Society of London in fulfillment of his promise to report "all things philosophical" from Aberdeen, Scotland. In it, he described "a Man in this Country" with the surprising "Dotrel-quality ... that inclines him to imitate unawares all the gestures and emotions of those with whom he convers-



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eth." This was the first published case of echopraxia, a phenomenon that had been casually noted by Digby in 1644, and which is not uncommon in catatonic states. The patient's 'simple answer' to the question of 'how he found himself affected', namely "That it vexed his heart and brain" is still about as modern psychiatry or neurology can make of it.

"Echo phenomenon" as they are called today, was so named by Moritz Heinrich Romberg (1795-1873),^[4] professor of medicine at the University of Berlin in his *Manual of the nervous diseases of man*, 1853 (London, Sydenham Society, vol 2, pp 180-181) translated from the second German edition (Berlin 1851) by Sir Edward H. Sieveking. Romberg had repeatedly observed echolalia or imitative movements of articulation in various morbid conditions of the brain. The patient, in a monotonous way, repeats the words and sentences spoken by somebody in his vicinity, without showing that his attention has been attracted, or that he associates any meaning with what he is articulating.

Echopraxia Described in a Letter ^[5]

"I remember, we had then occasion to speak of a Man in this Country very remarkable for somewhat peculiar in his temper, that inclines him to imitate unawares all the gestures and emotions of all those with whom he converseth. We then had never seen him our selves. Since our return, we were together at Scrachbogie where he dwells, and, no withstanding all we had heard of him before, were somewhat surprized with the oddness of this Dotrel-quality. This Donald Monro (for that is his name) being a little old and very plain man, of a thin slender body, hath been subject to this infirmity, as he told us, from his very infancy. He is very loath to have it observed, and therefore casts down his eyes when he walks in the streets, and turns aside when he is in company. We had made several trials before he perceived our design; and afterwards had much ado to make him stay. We caressed him as much as we could, and had then the opportunity to

observe that he imitated not only the scratching of the head, but also the wringing of the hands, wiping of the nose, stretching forth of the palms etc. And we need not strain complement to perswade him to be cover'd; for he is still put off and on as he saw us do, and all this with so much exactness, and yet with such a natural and unaffected air, that we could not as much suspect that he did it on design. When we held both his hands, and caused another to make such motions, he pressed to get free: But, when we would have known more particularly, how he found himself affected, he could only give us this simple answer- That it vexed his heart and brain.

I shall leave it to your consideration, what peculiar crises of spirits or distemper of imagination may cause these effects, and what analogy they bear to the involuntary motion of yawning after others, and laughing when men are tickled (which some will do if anybody do make that titilating motion with their fingers, though it be at a distance from them;) and whether, if his Nurse have accustomed him to the frequent imitation of little motions and gestures in his infancy, this may not have had some influence to mould the texture of his Brain and Spirits, and to dispose him to this ridiculous apishness?"

References

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