between neurochemistry and pathogenesis of affective disorders. However, epidemiological data is necessary to confirm a different incidence of affective disorder in Down's syndrome. Age and developmentally-matched control subjects, and further neurochemical information regarding young adult Down's syndrome patients without dementia, are necessary before the two putative findings may be connected.

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References


Dangerous Delusions: The 'Hollywood Phenomenon'

SIR: We agree with Drs de Pauw & Szulecka that both the prevalence of delusional misidentification and its relationship to violence are underestimated (Journal, January 1988, 152, 91–97). We report two cases of a variant of delusional misidentification of the environment. The delusion consists of the belief that the patient’s environment has been changed to a film or theatre set peopled by actors and in which the patient is a stunt man who was supposed to crash it... it was rigged so I wouldn't get hurt’. He was arrested and later assaulted the police surgeon with what he erroneously believed was a bottle of “harmless sugar glass”, causing severe injuries. Mr A. claimed that he, the surgeon, and the police were all play actors and that his actions would have “no real consequence”. Remanded in prison for psychiatric reports, he was intermittently violent in response to similar misidentifications until he became euthymic following medication. He was transferred after conviction on a Hospital Order, and on admission had insight into his previous delusions.

(ii) Miss B. exhibited both a Capgras phenomenon and a ‘Hollywood phenomenon’. She was a single retired midwife in late middle age, living alone. She had had several admissions with a diagnosis of depressive psychosis or schizophrenia. On this occasion she was depressed with early morning waking, psychomotor retardation, appetite and weight loss, and felt hopeless and worthless. She believed relatives were impostors and was verbally aggressive towards them. She believed that the hospital was a film set peopled by actors, the admitting doctor a film director, and that the purpose of the interview was to obtain a script for the film. While she struggled and was verbally hostile at attempts to detain her, there was no serious violence. She recovered fully after ECT.

Both cases involved affective illness without organic impairment. However, we do not believe that the 'Hollywood phenomenon' is specific for affective disorders, and would be interested to hear of other examples. We believe that like the Capgras phenomenon itself, the 'Hollywood phenomenon' is not uncommon, but under-reported. It differs from the superficially similar transient experience in derealisation in that it has a real, not an 'as if' quality, is enduring, and has all the features of a delusion, including the tendency to be acted upon.

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Reference


Calcium Therapy for Neuroleptic-Induced Extrapyramidal Symptoms

SIR: Lichtigeld (1965) hypothesised that hypocalcemia disrupts nerve cell function in the basal ganglia, causing extrapyramidal symptoms (EPS). Schaaf & Payne (1966) reported neuroleptic-induced EPS in hypoparathyroidism only when these patients are hypocalcemic. We report two patients

https://doi.org/10.1192/bjp.152.5.722a Published online by Cambridge University Press