



Quotes and titbits

Anosodiaphoria in a Simenon's character

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In his well-known communication on anosognosia at the Société de Neurologie (see [Jenkinson & Fotopoulou, 2014](#)), [Babinski \(1914\)](#) stated “J’ai observé aussi quelques hémiplégiques qui, sans ignorer l’existence de leur paralysie, semblaient n’y attacher aucune importance, comme s’il se fut agi d’un malaise insignifiant” (p. 846). He proposed the term *anosodiaphoria* to designate the attitude of brain-damaged patients who are fully aware of their deficits, but show indifference or lack of appropriate affective concern and interest. Etymologically, as recently remarked by [Heilman \(2014\)](#), the label includes four Greek morphemes: a (without), noso (disease), dia (apart), phoria (emotional state).

[Critchley \(1957\)](#) played a crucial role in disseminating the neologism introduced by Babinsky. In a major French journal, Critchley maintained that anosodiaphoria “may be fairly interpreted as evidence of inadequate insight, though there is no virtual unawareness of the fact of paralysis and certainly no denial of such. The unconcern may well be regarded as an indication that the victim is not fully cognisant of the social and personal implications of his paralysis, its meaning as a mark of serious disease of the brain, and its sinister connotation in the realm of prognosis” (1957, p. 543).

Anosodiaphoria has been assigned to the class of “anosognosic behavioural disturbances” by [Frederiks \(1969\)](#) or, more simply, to the “anosognosic phenomena” by [Cutting \(1978\)](#). In his milestone paper, [Cutting \(1978\)](#) described patients with anosodiaphoria as people that “although admitting to their disability on direct questioning, minimise its extent,

often in a jocular fashion” (p. 548). He reported on four patients with anosodiaphoria without anosognosia, two with a right hemiplegia and two with a left hemiplegia. In a study on the evolution of anosognosia for hemiplegia from stroke onset to 6 months later, [Vocat, Staub, Stroppini, and Vuilleumier \(2010\)](#) observed anosodiaphoria in the hyperacute stage (44% of patients), in the subacute stage (36%) and in the chronic stage (21%).

The famous Belgian writer Georges Simenon described a clear case of anosodiaphoria in the novel “Le Président”, published in 1958 by Presses de la Cité but written between 8 and 14 October 1957, very few weeks after [Critchley's \(1957\)](#) paper appeared. It is possible that Simenon, who was very curious to medical facts, knew the paper or heard about it in Paris. The president is a retired politician, former French premier self-exiled in Normandy, who suffered from a right cerebral stroke. The novel is a masterpiece of suspense and introspection; Simenon offered a superb psychological portrait and a thoughtful depiction of the dynamics of power. The first English translation was published as “The premier” in 1961.

Extract from Georges Simenon, *Le Président* (1958) [The President, translated by Daphne Woodward, Melville House printing: September 2011]

“Since the attack, three years ago, that had kept him in bed for nine weeks, and then on a chaise-longue, his way of walking had never been quite natural. (...) “I waddle like a duck!” he had said jokingly at the time. Nobody had laughed. He’d been the only one who’d made light of the business. And yet he followed, with almost impassioned interest, everything that went on inside him. (...)

[On the day of the stroke] he had felt in his left leg, beginning at the thigh and creeping slowly downwards, a skin-deep warmth accompanied by the prickly sensation that one feels, for instance, after sitting for a long time beside a stove or in front of a log fire.

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With no uneasiness, curious as to what was happening to him, he had gone on walking, his faithful stick in his hand (...) until, without thinking, he had rubbed his thigh with his hand. To his stupefaction, it had been rather like touching another person's body. There was no contact. He was touching his own flesh, pinching it, and he felt it no more than if his flesh had been cardboard.

Had that scared him? He had turned around to tell Madame Blanche about it when, all of a sudden, his leg had given way, slipped from under him, and he had found himself huddled up at the side of the path.

He felt no pain, had no sense of any danger, was simply conscious of his ridiculous posture and the rotten trick his leg had so unexpectedly played him. (...)

[Professor] Fumet, who understood his character, had offered to tell him frankly what had happened. He'd say no. He refused to be ill. He didn't want to know his illness, and not for a moment had he been tempted to open one of his medical books. (...)

Contrary to his expectation, it wasn't an unpleasant memory. He remained very detached. (...) When [the three doctors] felt obliged to withdraw into corners to talk in low tones, he amused himself by studying the characters of the three men, and the idea of death didn't even occur to him. (...)

There had been some displeased moments, particularly when he'd been given a lumbar puncture and again when they'd taken an encephalogram. But he had never stopped joking, and at about four in the morning, when they were busy in the laboratory, he asked whether someone could get him a quarter bottle of champagne".

REFERENCES

- Babinski, J. (1914). Contribution à l'étude des troubles mentaux dans l'hémiplégie organique (anosognosie). *Revue Neurologique*, 27, 845–848.
- Critchley, M. (1957). Observations on anosodiaphoria. *L'Encéphale*, 46(5–6), 540–546.
- Cutting, J. (1978). Study of anosognosia. *Journal of Neurology, Neurosurgery and Psychiatry*, 41(6), 548–555.
- Fredericks, J. A. M. (1969). Disorders of the body schema. In P. J. Vinken, & G. W. Bruyn (Eds.), *Handbook of clinical neurology* (Vol. 4, pp. 207–240). Amsterdam: North-Holland.
- Heilman, K. M. (2014). Possible mechanisms of anosognosia of hemiplegia. *Cortex*, 61, 30–42.
- Jenkinson, P. M., & Fotopoulou, A. (2014). Understanding Babinski's anosognosia: 100 years later. *Cortex*, 61, 1–4.
- Vocat, R., Staub, F., Stroppini, T., & Vuilleumier, P. (2010). Anosognosia for hemiplegia: A clinical-anatomical prospective study. *Brain*, 133(12), 3578–3597.