

The Effectiveness of Perceptual Thinking Index (PTI) of Rorschach Comprehensive System in Diagnosing Schizophrenia in India: A Pilot Study

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One of the widely used psycho-diagnostic tests is the Rorschach Inkblot Test (RIBT). The studies on Perceptual Thinking Index (PTI) from the RIBT protocol, developed to diagnose schizophrenia, have been conducted in many countries but, there is dearth of studies in Indian context. Forty-five subjects, 15 each in schizophrenia, Anxiety Spectrum Disorders (ASD) and Normal Control (NC) group were randomly assessed with socio-demographic data sheet, Positive and Negative Syndrome Scale (PANSS), Hamilton Anxiety Rating Scale (HAM-A) and Rorschach Test. Statistical analyses including effect size (ES) estimation revealed that variables of PTI have differentiated schizophrenia from ASD and normal group. Medium to large ES of five out of seven variables between the groups have also revealed effectiveness of the index.

Keywords: Comprehensive System, Rorschach Inkblot Test, Perceptual Thinking Index, Schizophrenia, Anxiety Spectrum Disorder

The Rorschach Inkblot Test (RIBT) is one of the oldest and most utilized psychological tests in US by professionals according to many reviews (Camara, Nathan & Punte 2000; Piotrowski & Keller, 1989). Exner's Comprehensive System (CS) of the RIBT is unique from the other existing systems in three major ways. First, it is more quantitative in nature and reduces subjectivity in interpretation; second, the availability of six indices and third, availability of eight interpretive domains, which give a global depiction of subjects from both normal and psychopathological perspectives.

One of the most studied indices of CS is Perceptual Thinking Index (PTI), which was earlier known as Schizophrenia Index (SCZI). This was designed to deliver maximum psychopathological depiction of the schizophrenic patients.

PTI was built on four criteria given by Weiner (1966) for diagnosing a schizophrenic patient: the presence of a thought disorder, evidence of inaccurate perception of reality, poor emotional control and ineffectiveness in interpersonal relationships. In 1978, Exner included the

most related variables of these criteria in CS and formulated SCZI with six criteria in 1978 and further revised in 1989. Subsequent evidence of studies revealing that many non-patients, adults, adolescents, non-schizophrenic psychotics and patients with mood disorder with psychosis responded positively to those criteria (false positive responses) finally led to the development of PTI (Exner, 2000) with five criteria. X- and WSum6 are the two common variables of the two indices and reflect as an indicator of the disorder in the perception of reality (when X-%>29%) and WSum6 (weighted sum of 6 severe special scores, positive when WSum6>12 for R<17 or WSum6>16 for R>16) indicates the presence of serious thought disorders in schizophrenia.

Hilsenworth et al. (2007) have demonstrated significant and positive correlation between each variable with the total PTI score (item-scale correlation) suggesting all criteria are interrelated and serve the same purpose. They had found 0.79, 0.77, 0.57, 0.57 and 0.59 correlation coefficients respectively for the five criteria and stated that they were above the cut off (0.30) of acceptable coefficient values as per