

# Example of research paper on alien limb phenomenon

[Health & Medicine](#), [Body](#)



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## **Body Dismorphia**

Almost everyone is in some way are dissatisfied with certain aspects of his appearance. These characteristics may include a crooked smile, misshapen nose, eyes the wrong size or any other imperfections that are not significant. It can be a completely natural occurrence that does not have any adverse effects beyond altering what a person wears and makeup and they buy. Most of the population simply makes accommodations for these undesired characteristics. If someone feels she has short legs she may just wear high heels and an imperials waist to give the illusion of longer legs. A man with a weak chin may grow a beard and trim the beard to give the appearance of a more masculine jawline. For many people the dissatisfaction comes to a point where it can become an overriding negative influence on a person's life even to the point of becoming life threatening when the negative emotions around the episodes of disphoria are severe to the point where he chooses to take drastic actions to physically correct the problem.

## **Body Dismorphic Disorder**

The diagnosis that describes the chronic mental condition that a person cannot stop thinking about a flaw, no matter how minor, real or imagined is body dimorphic disorder.(May Clinic Staff, 2013) Often a person who has this form of disorder will spend hours every day dwelling on this issue. Dwelling in this manner can lead to trying to find ways to repair the perceived problem areas. No matter what is done the problem area will not be fixed; only temporarily masked.

There are a number of basic symptoms that can occur with this disorder. The preoccupation with the physical appearance is only the first. He will believe that he has some kind of physical abnormality to the point of being embarrassed and avoiding social contact. He will try to hide appearances by wearing certain kinds of clothing, makeup or growing facial hair. The symptoms can become severe and alter someone's life in significant ways. Depending on the person there are two ways that a person can resolve these issues. He can either work to resolve the internal problem that causes the dissatisfaction with the physical appearance or the appearance can be altered to satisfy the internal dissatisfaction.

One of the most extreme methods a person might attempt to change their outward appearance to alleviate their internal trauma is to physically alter their external appearance. In many cases this can be done safely but for many cosmetic procedures especially this can be something that holds extremely high-risk adverse side effects and even death.

An extreme example of a cause for the desire to surgically alter one's appearance is the alien limb phenomenon. With this syndrome a person will experience involuntary muscle movement of a limb accompanied by a strong sense of estrangement with that limb. The individual will feel as though the limb is not properly a part of their body. Findings in a study regarding this population showed that there was a strong link between the alien limb phenomenon and underlying damage to the underlying parietal cortex, specifically the right parietal. These patients often report that the limb is being controlled externally or is a separate entity to itself even to the point of thinking it is a sentient separate being.

One of the supposed causes of this disorder is stroke which is a factor that has been demonstrated among pediatric patients. Because an entire host of physical causes for this disorder exist and physical changes in many patients have been observed there is a chance that a medical cure may be obtained at some future date. Treatment for this condition, bio medically and psychologically, are both available. If it becomes severe enough that treatment is not sufficiently successful or that treatment is avoided the afflicted may try to find his own means of self-treatment. There are recorded and reported cases of clients seeking amputations in order to escape the alien invader that is their limb. Since this is not a proper treatment for the disorder it is not something any insurance will pay for leaving some to either try to pay for it in cash or treat the condition themselves. Some may try to cut off their limb while others may attempt removal through loss of blood flow or freezing. The last common tool used is to attempt to damage the limb

to an extent that it cannot be saved so that emergency medical personnel at a hospital will have no choice but to remove the limb.

## **Gender Disphoria**

With this problem a major problem is that the external appearance does not adequately reflect the internal perception of what that appearance should be. (Gender Dysphoria, n. d.) According to the DSM-V when a person's gender at birth is contrary to the one that they identify with that person's diagnosis is gender dysphoria. This diagnosis replaces the terminology that is utilized in the DSM-IV TR, which describes the condition as gender identity disorder.

For this to be considered a condition the person must have the disagreement between his biological gender and the one he self identifies with that persists for longer than 6 months. Children must not only have the presence of this disagreement but they must also verbalize it clearly and with understanding. It must cause significant disruption to daily life including social, educational and professional. Additionally a persistent desire to remove one's sexual traits is a strong indication of gender dysphoria.

Increasingly this diagnosis has become more accepted and stigmatization has been reduced overall through the years. The change in the DSM diagnostic coding is a direct reflection of this. Currently many different forms of treatment exist for this problem. Initially the person should be involved in counseling to increase the likelihood that this is not a temporary psychosis. The counseling would continue to work on coping techniques and determine what further actions if any should be taken to address the condition. A

person can choose to live as the other gender, dressing differently, acting differently and completely taking on the role of that gender. He may choose at this point to take hormones to further gain traits of their self-identified gender.

Ultimately a permanent change in gender has some extreme solutions. Legally and socially it is possible to change the recognized gender of an individual. Physically it is possible, to an extent, to change a person's gender. The surgeries are primarily cosmetic with the exception of the, often last to be performed, genital alteration surgery. Gender reassignment, like any surgery, has certain criteria that must be met before it can be performed but there are also psychological standards.

There is a list of materials and prior steps that must be taken before a patient undergoes any kind of gender reassignment surgery including mastectomy, gonadectomy, genital reconstruction, as well as cosmetic surgeries to create features more typical of the gender of self identification. (Gender Reassignment Surgery, n. d.) A technical bulletin from Aetna describes some typical standards for evaluating a case before surgical intervention. The patient must have a letter or recommendation, often two, from a mental health professional. He must be able to demonstrate a long and documented case of gender dysphoria. The patient must be mentally competent, have reached the legal age of majority and have all other medical conditions reasonable under control. Lastly, for many of the operations it may be required for the patient to have undergone a trial period of hormone treatment to be able to demonstrate a level of symptom alleviation associated with the use of hormones and living as the other

gender while maintaining a need to further the gender change.

Operations to correct the gender dysmorphia on a physical and biological level are more noticeable on a daily basis when referring to the cosmetic and upper surgeries. Cosmetic surgeries are the ones that are performed with the sole purpose of achieving an appearance that better meets societal standards of what a person of a given gender should look like. These surgeries can include but are not limited to chin, cheek, chin, hair, thigh, butt and calf augmentation. These plastic surgeries help by letting them see the self-identified gender in the mirror and to help others identify them as the desired gender.

The second level of surgery is the top surgery. This is obviously different between the genders. In women this operation is one that is generally reserved for those with extreme cases of breast cancer and has some high risks and is effectively not reversible.(Monstrey, Ceulemans, and Hoebeke, 2011)It is possible to reconstruct breasts out of other body tissues but they cannot be fully replaced with functional mammary organs. The difference between the radical mastectomy that is performed for cancer treatment and that of the sex change comes from the overall goal. With this surgery being cosmetic in nature it is not necessary to remove the nipple or all breast tissue. The nipple is preserved and tissue is used to ensure that the resulting chest reasonable resembles the male chest the patient wishes to emulate. For men this process is safer because there are no body parts to be removed. For men the process involves taking hormones that promote the development of breast tissue potentially followed by the utilization of breast implants to augment size. They may not be hormonally capable of lactation

but the object currently is the appearance. The lack of function is less of an issue because the other surgery does not create any kind of ability to produce children.

The operation that often marks the completion of the transformation is the genital reassignment surgery. It is common thought that this surgery involved removal of body parts. For example, it is not uncommon for people to believe the penis is removed and a vagina is created, In reality the body tissues are surgically altered in a manner that allows the surgeons to create the penis or vagina from very little tissue. Depending on the quality of the work and biology these surgically reassigned genders may or may not be functional body parts. Assigned females may need extra lubrications and assigned males may require implants that allow for physical arousal.

In women various surgical techniques are used to create the phallic organ. These range from surgically altering the organs present to taking skin from other parts of the body to surgically manufacture the organ.

With reduced stigmatization of this diagnosis the prevalence of individuals attempting to alter themselves is reduced but not illuminated. It is still a possibility that someone becoming desperate enough might attempt to obtain surgery through unsafe channels or may even attempt removal of certain anatomy without surgical intervention. This is another example of how these dysmorphia can be deadly. For many the surgery is the only option but it has very high risks and does not remove the stigma of being transgendered. What it means is that other no longer have the choice to ignore it. People have to begin to understand and respect their decisions.



## **Alteration of Appearance**

Other forms of dysmorphia do not necessarily involve the removal of any body parts. The for mentioned examples are ones where the individual does not feel that the physical body is correct. The sentiment expressed by the individual might say they are one thing, which is in the body of something else, or has a body invaded by some external force. Other examples are not different in that the person is not in an incorrect body that I wrong for who they are, rather the person with these form of dysphoria have a body they relate to but does not live up to their expectations, hopes, wishes and dreams.

The most minor example of this phenomenon is something that I becoming accepted to the point of being a modern trend for the popular people. Body art has been around since before biblical times. The portion of the Bible that people often quote as evidence of the evil of homosexuality also contains text, condemning tattoos of any kind.

Tattooing has been around for thousands of years. The earliest example of this practice was found on a 5, 200 year old frozen mummy. Tattooing in general is associated with a number of tribes that reflect their customs. Many native American cultures for example utilized tattoos as a form of identification. Many other tattoos were created for the purpose of rights of passage to identify that a child has reached adulthood and therefore has all of the rights and privileges involved. For many others getting a tattoo is a sign of devotion to their gods. More recently people have been getting tattoos because they believe they are attractive and will augment their appearance or hide something.

The practice of tattooing has remained relatively unchanged in this time.

Some sort of pigment is applied to a sharp instrument which is struck against the skin to form patterns or images upon the skin.(Snijders, 2012) The goal is to get the pigment deep enough that it will not come off with dead skin but not so deep that it is carried away by the blood in the manner that the body deals with all unnatural foreign objects entering the body.

The machines these days are based on the design of the needles being pushed in and out by motor whereas older techniques used bamboo that was hammered onto the skin. Modern tattoo machines are based on the old fashioned doorbell and hasn't changed in years. The coils pull on a metal level with the needles attached at one end. Once the needle is in the contact with the power is temporarily broken to allow the magnets to let go and start the process over again.

The reason behind tattooing may have changed over the thousands of years it has been practiced. When relating to conditions categorized as dysmorphia, tattooing can be used to hide a flaw such as a birthmark. It may also be used to augment appearance or to demonstrate some idea that is securely entrenched in the psyche of the individual but not adequately expressed on the outside through clothing, personality or makeup.

When a person gets a tattoo it therefore has the capability to partly transform a person's external presentation in a way that will more accurately reflect who they feel they are on the inside. Many people will be of the opinion that their body, even if they don't see any fault with it, does not accurately reflect who they are as a person. The use of body art can directly change the perception of others. It can often be unpredictable how people

will react but the goal is to help the external appearance match the ideal inner image.

In modern times the tattoo is generally safe because of the presence of disposable materials as well as more affordable autoclave solutions for small tattoo shops to reach hospital equivalent sterilization. This is unfortunately not a standard practice; many parlors still reuse needles and fail to clean up properly putting everyone at risk for any blood born pathogen. The prison tattoo is a perfect example of a risky kind of tattoo to obtain.

## **Conclusion**

Even considering the fact that the body dysmorphic disorder is not directly a cause of physical illness or harm, there is physical risk. Even if the physical alterations that can be utilized as a means of treatment of this mental state are performed properly by trained surgeons in a hospital environment there are always inherent risks when anyone has a surgery for any reason. When these alterations are performed by people who are not qualified, and are performed rather by those who wish to alter themselves, the risks are exponentially higher and can lead to injury, illness or death. The common trend with these conditions is that the initial method used to attempt to cope with dysmorphia is psychological counseling or some other mental health approach. Even if there is no underlying mental health concern it is important to gather information and have a second opinion before taking on life altering and potentially life threatening changes. Experts emphasize the importance of taking on proposed changes in a temporary fashion to try them on for size. Often upon attempting this task, people realize that they

were not unhappy because of their gender, for example, but were insecure in general and looking to make some kind of change to alleviate the symptoms they felt. It could be homosexuality without dysphoria. With proper guidance unnecessary risks can be avoided and lives can be saved.

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