



## Case Report

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# Alice In Wonderland Syndrome: A Rare Psychiatric Manifestation in Medical Science

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## Introduction

The term Alice in Wonderland syndrome was first introduced by the British psychiatrist John Todd (1914–1987) in 1955 [1]. According to John Todd, Alice in Wonderland syndrome (AIWS) is a self-experienced paroxysmal false sense of body image involving distortions of the patient's own body's size, mass, or shape or its position in space, which is frequently accompanied by depersonalization and/or derealization [2].

**Aims and Objectives:** To study about Alice in wonderland syndrome.

## Methodology

Mr. 'R', the 58-year-old patient, was brought to the chamber by his relatives. He suffered a stroke six months ago. Mr. 'R' began acting strangely for a few days, according to a family member. He screamed out, "Look at my hands; one of them seems smaller than the other!" Everyone rushed to him after hearing his screams. They examined his hands and fingers and discovered that they were flawless, perfect, and free of deformities. They couldn't figure out why Mr. "R" was complaining about his hand shrinking. Everyone tried to reassure Mr. 'R,' but he refused. They also brought measuring tapes, measured his hands, and showed Mr. R. the results. Mr. R then stopped crying. After a while, he began screaming again, claiming that his hand and finger had become small, absent, and displaced. Everyone comes back to reassure him. Everyone reassured him by measuring his hands and feet and removing his cloaths.

## Discussion

The term Alice in Wonderland syndrome was first introduced by the British psychiatrist John Todd (1914–1987) in 1955. John Todd named the syndrome for the perceptual disorder of altered body image experienced by the main character in "Alice's Adven

tures in Wonderland" (1865), written by English writer Lewis Carroll (Charles Lutwidge Dodgson). In Carroll's Alice Adventures in Wonderland story, the main character, a baby girl named 'Alice', experienced several dramatic changes in her body size and shape (e.g., shrinking to 10 inches high, growing unnaturally tall but not any wider, and growing unnaturally large) [3].

AIWS occurs most frequently at night and is more common in children [4]. Symptoms usually last a few minutes to a few days, but they can last for years or even be lifelong [6,7]. It is the result of perceptual distortion. The distortions of percepts are experienced by a waking individual which is based on appropriate stimuli from the outside world, of which a highly specific aspect is altered in a consistent manner [8]. It is believed that perceptual distortions are caused by structural or functional lesions in different parts of the perceptual network, such as area V4 for hyperchromatopsia and V5 for akinetopsia [6]. The diagnosis of AIWS is still quite ambiguous; few physicians are familiar with it. In 2016, a review of the extant literature revealed that only 169 cases of AIWS had been reported since the syndrome was conceptualized in 1955, which is 1.1 cases per year on average [9].

There are many possible causes of AIWS, including migraines [10], temporal lobe epilepsy [11], use of the mast cell stabilizer drug montelukast [12], H1N1 influenza [13,14], Lyme disease [15], mononucleosis [16], Epstein-Barr virus infections [17], psychoactive drugs such as LSD [18,19], infarction [20], and brain tumors [21].

### Acknowledgement

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### Conflict of Interest

No Conflict of interest.

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