

Case Report

The woman with habit of eating uncooked rice

Bitupan Kalita*, Sabita Dihingia

Department of Psychiatry, Assam Medical College Hospital, Dibrugarh, Assam, India

Received: 12 December 2017

Accepted: 09 January 2018

***Correspondence:**

Dr. Bitupan Kalita,

E-mail: bitupan@ymail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Eating of non-nutritive substance (pica) is unusual in adult. Usually eating of non-nutritive substance in adult is associated with pregnancy, psychosis or mental retardation. In this case report we are presenting an adult female who presented with eating of uncooked rice regularly for last two years. Our patient is a housewife, non pregnant and mother of an eight year old girl. After receiving treatment with Fluvoxamine patient showed marked improvement, suggesting similarity between pica and obsessive compulsive disorder.

Keywords: Pica, Adult, Non pregnant

INTRODUCTION

Pica is persistent eating of non-nutritive, non-food substance, which is mostly seen in children.¹ It can occur due to many reasons. Pica has been reported in paediatric age group and also found to be co occurring in obsessive compulsive disorder.² But pica is rare in adult. Usually use of non nutritive substance in adult is associated with pregnancy, psychosis or mental retardation.³ During pregnancy taking of clay, starch, uncooked rice has been reported.^{4,5} Patient with habit of eating non nutritive substance might present with different physical problems like loss of appetite, pain abdomen, irregular bowel habit, anaemia, dental injury etc.⁶ In this case report we are reporting an adult non pregnant woman who has developed habit of eating uncooked rice, which is not the usually present in the patient's socioculture.

CASE REPORT

A 31 year old female, housewife, mother of eight year old daughter, presented with the complain of eating of uncooked rice regularly for last two years. Her problem started with an urge to eat the uncooked rice while she goes to cook and see the uncooked rice in the kitchen. At

the beginning her urge to eat raw rice started only when she saw the uncooked rice mostly when she cooks. Initially she tried to resist the urge, but on other time she failed to resist. Gradually her urge went on increasing. She used to chew the uncooked rice till her cooking was over. Gradually she started like the taste of the uncooked rice and she would take at other time also while she was not cooking. She began to keep chewing the rice during her household activity. Later on it so happened that she had to keep a pouch of uncooked rice with her whenever she went out of house. In a day she used to eat around 400-500 gm of uncooked rice. She also complained of having irregular bowel habit and off & on fullness and pain abdomen. There was no history of low mood, disturbed sleep, decrease interest in activity etc.

On physical examination her vitals were found normal, abdomen was found to be distended but there was no tenderness. On mental status examination she was preoccupied with the problem of eating uncooked rice, no formal thought disorder, no delusion and hallucination, judgment and insight were intact. She was provisionally diagnosed to be suffering from Obsessive compulsive disorder.

She was put on fluvoxamine 50 mg daily, which was increased to 150 mg gradually. At 4 weeks of follow-up there was marked reduction in her urge to eat the raw rice. Fluvoxamine was increased to 200 mg. After eight weeks of her initiation of treatment she was free of the urge to eat uncooked rice.

CONCLUSION

Use of non nutritive substance can occur in adult outside its usual association with pregnancy. There are evidences that support inclusion of use of non nutritive substance in obsessive compulsive spectrum disorder.⁹ Improvement of the problem with the use of SSRI in our patient also supports it. Pica is commonly seen in low socioeconomic status people.⁷ Literatures suggest association of psychodynamic, socioeconomic and cultural factor with use of non nutritive substance.^{7,8} Our patient belong to lower socioeconomic status and there was history of alcohol intake by husband.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: Not required

REFERENCES

1. Feeding and Eating Disorders. In: Diagnostic and Statistical manual Of Mental Disorders. Fifth Edition. 2013: 329-331.
2. Chakraborty S, Sanyal D, Bhattacharyya R. A unique case of pica of adult onset with interesting psychosexual aspects. Indian J Psychol Med. 2011;33(1):89-91.
3. Bhatia MS, Gupta R. Pica responding to SSRI: an OCD spectrum disorder? World J Biol Psychiatry. 2009;10(4):936-8.
4. Chapter 31 Child Psychiatry. In: sadock BJ, Sadock VA, Ruiz P, editors. Kaplan & Sadock's Synopsis of Psychiatry Behavioral Science/Clinical Psychiatry. Eleventh edition. 2009: 1206-1207.
5. Upadhyaya SK, Sharma A. Onset of obsessive compulsive disorder in pregnancy with pica as the sole manifestation. Indian J Psychol Med. 2012;34(3):276-8.
6. Federman DG, Kirsner RS, Federman GS. Pica: are you hungry for the facts? Conn Med. 1997;61(4):7-9.
7. Rose EA, Porcerelli JH, Neale AV. Pica: common but commonly missed. J Am Board Fam Pract. 2000;13(5):353-8.
8. Singhi S, Singhi P, Adwani GB. Role of psychosocial stress in the cause of pica. Clin Pediatr (Phila). 1981;20(12):783-5.
9. Haoui R, Gautie L, Puisset F. Pica: a descriptive study of patients in a speciality medical center. Encephale. 2003;29(5):415-24.

Cite this article as: Kalita B, Dihingia S. The woman with habit of eating uncooked rice. Int J Sci Rep 2018;4(2):44-5.