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On Creative Madness

Alice Sweedo

The affiliation of insanity and genius can be traced back earliest to the Greeks, where individuals considered to be gifted in some respect attributed it to possession by an inspirational “demon” which served as an intermediary with the gods. This attitude is at odds with the perception of genius during the Enlightenment period as being the epitome of rational judgment. During the Renaissance, however, the idea of a “mad” genius returned as a self-established reputation invented in order to break away from cultural norms by establishing genius as being directly linked to imagination. This departure from genius as rationality led to the association of originality with some form of mania, which had the desirable connection of distinguishing the artist from the average person, and elevating them to a unique, set apart position [1].

As psychology advanced, there was effort to establish scientific evidence in favor of the association between creativity and some form of abnormal brain activity. However, this was difficult for a number of reasons. A consistent definition of creativity and categorization of “mental illness” was rarely well established. Many studies between 1925 and 1994 which claimed to have confirmed a link between mental disorders and creativity did not find statistical differences between the groups or failed to follow modern experimental standards such as maintaining a control group for comparison and using blind assessments. Some of the studies did follow rigorous experimental standards and established clear definitions of creativity and mental illness, but failed to find any link [2]. Many studies have relied upon the word of the individual regarding their mental health, a method which has been questioned by some due to the risk of introducing non-objective self perceptions resulting from personal identifications that are manipulated by society. In a society which considers both artistic genius and mental illness as forms of deviancy which may be interconnected, it is not unreasonable to believe that some individuals may shape their answers or their perceptions of themselves in order to validate their passion, over-emphasizing behavioral elements which might be considered “abnormal” [1].

However, psychological biographers have long found a distinct link between individuals with recognized creativity and some form of abnormal behavior. There have been a number of books written which emphasize the “connection between literary genius and neurosis” [3] by performing psychoanalyses on notable authors and poets. Such books include *Touched with Fire* by K. Jamison, *The Literary Imagination* edited by H. Ruitenbeek, and *Genius and the Mind* edited by A. Steptoe to name but a few. However, this method has challenged due to its focus on notable individuals, whose reputation may be influenced by the extent to which they conform to this stereotype. There is also the related consideration that these notables may not have been immune from societal expectations of what it means to be a great writer, and thus may have emphasized any unusual behavior in their lives [4].

However, whether biographical analyses are a valuable method for determining a definitive link between creativity and some form of mental abnormality, there are trends that can be observed among notable writers and poets as to the symptoms exhibited by those who have been deemed “ill.” Periods of either unchecked or highly motivated inspiration, particularly when alternating with periods of depression and inactivity, are

symptoms associated with either bipolar or schizophrenic disorders. Some studies have found that manic patients exhibit “pronounced combinatory thinking,” and that writers “show conceptual style quite like those of the manic patients.” It has also been observed that manic patients will occasionally find the mania directed towards some creative mode, such as poetry, that the individual had not previously shown any disposition towards. Since the symptoms of bipolarity seem to affect artists of assorted mediums with a higher frequency than it affects brilliant scientists, it has been proposed that disorders may cause creativity rather than being correlational; “less dramatic, day-to-day aspects of the manic-depressive temperament can provide artistic advantage as well. For individuals who live with moods that change often and intensely, life is a tempestuous experience” [4].

Attitudes toward studying the association between mental irregularities and artistic tendency appears to have evolved towards an emphasis on studying the cases in which the connection clearly occurs and determining the causation in such cases. As the questions have evolved, “madness” has given way to “disorders” and “syndromes,” the separation between bipolarity and psychosis as been affirmed, the definition of schizophrenia has come to encompass a wide range of symptoms [5], and connection between creativity and additional disorders has been noted. This change in focus has corresponded to an apparent transition between the studiers. While in 1993, “neurochemical and anatomical processes responsible for the cognitive changes occurring during both pathological and highly creative states [were] poorly understood” [4], advances have since been made by neuroscientists in this area.

With new advances have come more definitive links between disorders and creativity. Some studies have confirmed previous understandings of the affiliation between bipolarity and creativity and the correlation between writers and assorted mental disorders [6]. Others have found evidence for a link between additional disorders and creativity, although bipolar and schizophrenic symptoms were still consistent. The list of disorders that have an evidence-based connection to creativity include both hypomania and schizotypal personality disorder, which has some overlapping symptoms with schizophrenia [7].

Neuroscientists have discovered that the drive associated with mania corresponds to levels of dopamine in the brain. An excess of dopamine has been found to lead to directed urges to act; this may exhibit itself through creativity, although it may not. Conversely, patients with Parkinson’s suffer from a lack of dopamine. Being so deprived of the drug and unable to properly regulate it, receiving a dosage of dopamine will often result in the patient experiencing some form of drive from its temporary excess. Similarly, this drive may be creative, such as a desire to play or compose music, or it may not be, such as an urge to gamble [8]. The urge associated with increased dopamine level corresponds to an increase in motivation and an increase in ideas. Thus, although the activity and drive associated with dopamine may not be transmitted through a creative output, such is often the case, as an increase in ideas is likely to lead to an increase in the number of creative ones [7]. An additional explanation for increased creativity in schizophrenic patients is that increased dopamine levels correspond with looser associational networks, and that in this state, ideas trigger more ideas, resulting in a cascading creative flow.

Although not listed by Flaherty as a disorder with an evidence-based link to creativity, Tourette Syndrome is understood to result from an excess of dopamine as well [9]. An MRI scan of a patient who discovered music as an outlet for their Tourette's revealed that the individual had a constant creative drive, and could not switch the flow of creativity on or off. In a similar patient, dopamine suppressant medication results in drowsiness and a lowered motivation level. It has been typically difficult to regulate a disorder associated with increased creativity without negatively affecting the individual's creative potential. This has been noticed in a variety of patients taking dopamine blockers, such as those with schizophrenia [7]. This reduction in motivation and creativity has led a number of patients with assorted disorders rejecting medication, or battling the desire to do so. Edward Munch, painter of *The Scream*, described this attitude when saying "[My troubles] are a part of me and my art. They are indistinguishable from me, and [treatment] would destroy my art. I want to keep those sufferings" [4].

The understanding of the link between certain mental disorders and creativity has evolved through societal pressures and scientific knowledge. Present understanding supports the idea that the presence of excess dopamine is related to increased motivation, which often finds a creative outlet. Thus, patients who suffer from some form of dopamine surplus often show an increase in creative productivity during spells in which the dopamine is in excess. Drugs which suppress dopamine may decrease symptoms of disorders, but often also decrease creativity. As this may lead to patients not taking medication for their disorders, attempts are being made to develop and use treatments which balance these conflicting effects.

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