Maladaptive Daydreaming and Dissociation: Both a Continuum and a Taxon

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COLIN A. ROSS, MD

Dr. Somer’s commentary provides a model of professional commentary on my article about the potential relationship between maladaptive daydreaming (MD) and Dissociative Identity Disorder (DID). At this stage in the study of MD, no one has all the answers, and multiple perspectives can contribute to our thought and research on the disorder. I did not find anything to disagree with in Dr. Somers’s commentary, but I have a couple of thoughts.

In terms of the subscales of the Dissociative Experiences Scale (DES), it is widely stated that absorption is normal, in contrast to the pathological subscales. This is true and not true. It is certainly true that staring off into space and missing part of a conversation is normal if it happens for a few seconds or even half a minute. What if it lasts two hours? Or two weeks? Then we call it catatonia. People with DID commonly score much higher on the absorption scale of the DES than people in other diagnostic categories. That is, they have normal absorption experiences to a pathological degree. This is exactly the same as a few drinks now and then being normal, but a bottle of whiskey a day not being normal.

My second comment is about Dr. Somer’s discussion of Janetian dissociation versus a diversification model of dissociation. This is an interesting way to think about the current embodiment of Janet in the form of structural dissociation of the personality. There are two apparently opposing models of dissociation in the field: a discrete pathological structural dissociation model, and what I think it makes sense to call a diversification model. Rather than either-or, I think that both models are useful and apply, and both are models of dissociation. This is much like the wave-particle duality
in physics. It is also like all of psychopathology, really: there is a continuum of more and more alcohol consumption, but the end-stage alcoholic is clearly in a discrete taxon compared to someone who never drinks. Both the person who has an occasional glass of wine and the end-stage alcoholic are consumers of alcohol, drinkers, but one has normal drinking and the other has pathological drinking. Similarly, I would say, there is both a continuum of dissociation and a discrete taxon of pathological dissociation.

I think that a diversification model, combined with thought about imaginary companions, makes a lot of sense as a way to think further about the relationships between DID and MD. MD has elements of normal absorption but also occurs in a discrete pathological taxon.