

ACKNOWLEDGEMENT

Life has been described by a poet as something nasty, brutish and short but one can not but marvel at the unexpected wonders it unfolds at every turn as it slowly but inexorably proceeds to its final end. My initial acquaintance with the Koro illness must have been one such unexpected event. When I left the state capital Calcutta for distant North Bengal to become a medical teacher in the course of my rural posting in government service, I had no time for missing Calcutta. This is because soon after I had joined the Psychiatry Unit of the North Bengal Medical College & Hospital in April 1982, an extensive Koro epidemic engulfed the entire North Bengal region in July of the same year. And, what a practical opportunity was presented to me to study intimately Koro, which in due course offered me almost an unlimited scope to learn so much about sexual neurosis, body image perception and the cultural aspects of psychiatric symptom formation. The efflux of time comprising the remaining six years of my stay in North Bengal passed almost fleetingly so to say as I remained engrossed in my work on these themes. My present work is nothing short of a fruitful culmination of the infinite inspiration that I then got to take up serious research on Koro and related sexual neuroses over the succeeding ten years.

I am personally indebted to over a hundred persons who have helped me in the course of this Koro research. There are marks of this assistance at all stages of this disquisition and without their help this research would not have been possible. Needless to say, I can not name all those to whom I stand indebted for the list is unusually long. Nevertheless, I can not help mentioning specially a few of such personalities in token of my gratitude to them as without their active encouragement and guidance this research would not perhaps have come out in the present form.

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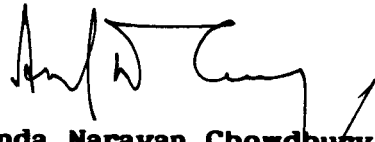
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In conclusion, I would like to say that this Koro research itself has brought into sharp focus a very important matter. The relation between cultural cognition and symptom perception, which is of paramount significance in a multi-cultural society that is India, deserves to be kept in view while treating a patient suffering from neurosis or psychosomatic disorder. I

think we should pay more attention to this aspect because only then will we, as physicians, be able to understand the cultural meaning associated with the symptoms experienced by patients and to provide proper treatment and followups. I have come to realize this very well in the course of my extensive travel (to various parts of West Bengal, Tripura, Assam, Orissa and Nepal etc.) in connection with my research on Koro. Perhaps I would not have realised this had I not been so deeply involved with Koro research.

Dated _____

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