

## CASE REPORT

# Pathological Milk Drinking

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## Abstract

*A 46-year old lady presenting with drinking excessive quantities of milk is highlighted. The discussion focuses on whether this behavior is pathological (German J Psychiatry 2006;9:120-122).*

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## Introduction

Milk, the foundation for all other dairy products is in itself an exceptional food. Milk is rich in high quality protein, vitamins, calcium and phosphorus and is considered a requisite for robust children and a beverage adults were encouraged to continue drinking after childhood (Yanovski 2003). It is uncommon to see anybody presenting to the psychiatric help because of excessive milk drinking. A MEDLINE search did not reveal any such problem reported in the literature.

We are reporting a lady who presented with drinking excessive quantities of milk.

## Case Report

Mrs. V, a 46 year old married lady was brought to the clinic with complaints of increased milk consumption. This started ten years ago when she had undergone tubectomy and a treating physician had advised her to consume nutritious food like milk. After that she started drinking one liter of milk everyday and gradually in next three years it increased to four to five liters per day. She would consume 600 ml of milk during breakfast and 400 ml prior to lunch. She would demand for an additional 500 ml of milk during each meal. The patient would then insist on taking (600 ml) during

snacks and dinner. She would do all the household work if the milk intake was not restricted by family. Otherwise she would complain of weakness and lie in bed throughout the entire day. She would report improvement in weakness an hour after drinking milk. This pattern of drinking continues and she takes a major share of the total milk acquired by the family. Family members do not consume milk like her but she advises them to drink more milk. Her maximum milk free period is three days in last ten years.

On examination patient is obese but she did not consider herself overweight (BMI 36.2). There were no features suggestive of body image disturbances.

Laboratory investigations including lipid profile, thyroid function test and liver function test were normal. Mental status examination did not reveal any mood or psychotic symptoms. Patient attributes that milk alleviates her body weakness.

## Discussion

A review of literature revealed consumption of excessive amounts of milk along with, tea and smokeless tobacco as a ritual by the Tuareg tribe in Mali (Auld & Grootendorst, 2004). Milk drinking as a rational addictive behavior has been described in literature (Hureiki & Laqueille 2003, Reid & Hubbell 1994).

There is no reported literature of similar cases seeking consultation to a psychiatric clinic. Milk drinking in this patient did not have the characteristic physiological, behavioral and cognitive phenomena associated with dependence and non-dependence producing substances. Patient did not report of craving for milk when milk was denied to her. Is excessive milk drinking culturally acceptable? Milk is not intrinsically rewarding but relieving her symptoms has been her frame of thought. So her belief is non-delusional and she will stop excessive milk consumption if any other alternative treatment will relieve her symptoms. Patient did not consider this thought as intrusive or irrational. We are not able to reach any syndromal diagnosis in this index case. Initially SSRIs were tried but she had not shown any significant improvement. Do we need to include substances like milk into our classificatory systems?

## References

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