Introduction

Mental capabilities are the functions of our brain, in words of today, they are the SOFTWARE SW and the HARDWARE HW respectively. The manipulator between SW and HW in present computers is the electrons of voltage only. In our brains it is the electrons, but in extremely complex chemical system/s. The governor in both of these, the brain and the computer, is the welfare of the hardware. Wildly, it means the sound structure brings to sound function. Structure is the micro and macro tooling (tooling from tool, where a designer use his art to fuse the shape and the function for a given target, not necessarily or always the shape/structure means the aimed function!!). If we come back to the simplicity and the logic we conclude there is no functional mental dysfunction. But a reversible or irreversible alteration in the brain’s chemical systems! Here I try to explain the biological events behind mental dysfunction on the light of my work where many mental impairments were treated on cellular level of host and invader bases where it is not unknown and solved by tranquilizers or sent to me to slice the brain.

Aim

To pin point the real cause behind what is so called a functional mental impairment or cognitive dysfunction.

Patient and method

Over the past more than 15 years of my work in the field of neurosurgery I remember from my primary medical and clinical teachings which stated that many organic diseases either presented as a pure mental impairment or cognitive dysfunction. And hence the function. It is the same as when you wrap your finger with a piece of cloth (handkerchief) which itself will accommodate to your face differently. This is the GENERAL PLASTICITY GP which means not only brain as a whole do it, in fact GP has a depth which extends to the soul of neuron interior or the sub- cellular geometry which tunes with the required molecular chemical event . It needs no proof, chemical reaction is a play of pallet, it is well known for chemists, so why cells do the differ??!! It just want to be seen by us or at least feel it to better know our selves and see how it behaves. What is important here is the COUNTER EQUATION. What is this?? It is the same as we mentioned above but expressed by a different and foreign cell/s which is termed as pathogenic microbe the same as the term of virus for the a aforementioned computer system where the SW of it is altered by a specially designed one (virus or SW) but computer systems on its glory is a linear ones. Here we want to link all and say there is no functional and structural concepts a part. Here I try to explain the biological events behind mental dysfunction on the light of my work where many mental impairments were treated on cellular level of host and invader bases where it is not unknown and solved by tranquilizers or sent to me to slice the brain.

Keywords: Mental health, Mental impairment, Neurosis, Psychosis, Anxiety, Schizophrenia, Alzheimer’s, Encephalitis, Mutism, Dementia, Dementia praecox, Pre-senile dementia, General plasticity, Counter equation, Madness, Einstein, Anti-social behavior, Autism.
causes vanished in management!! As I am interested in the biological causes of neurosurgical pathologies and as we have our private clinic in addition to the public hospital clinic and many travel work in some countries all that enabled me to focus or apply the primary teachings that put in consideration the organic bases for mental abnormalities whether pure or mixed with somatic symptoms (non-psychiatric) and signs. So all patients of any age group and both genders over this long period they had been analyzed for the same. So the number is several tens not more because I am not the referral station for such cases.

Results
I will not talk about the highly positive results of mild or moderate cases in what so ever of mental alteration. Here, I want to mention the degree of a social term which is the ‘madness’ which is referred with to a male or a female who are having a wide spectrum and different grades of anti-social attitudes and behaviors, those seen stray in streets homeless and in a state of anti-human. I have many cases that turned into normal subjects or nearly to (due to lack of long follow up) just when treated on clinical bases for a Neuro- or general Brucellosis. It doesn’t matter how many they are (really they are plenty and I am sorry not have their record because somewhere in Libya and the others in Iraq, some until the date visit me, but because they are so poor they discontinue treatment with anti-Brucella whence become alert then decline after a while due to partial treatment or more correct no eradication, but when they resume anti-Brucella became better which gives a practical and scientific support to this vision). Here I want to say something about the meaning or depth of severity in a given case. A young male of thirty of age (engineer but work in a job so away from his education) I know him socially, he looks sound in every aspect but he has failed marriage (divorced due to social problems) and so many misunderstandings with his father (common all over the world!!). One day he asked for my advice to treat his irritable bowel and some gastric discomfort he was suffering for long, what he took was without benefit to end his sufferings or discomfort. From my interest in biological bases in causes I constructed a concept of endemicity of Brucella in our area, many whom treated symptomatically for GIT problems are chronic sufferers because these troubles are mere a complications to chronic or sub-acute brucellosis. So I just prescribed him a half dose of anti-Brucella (half dose has to be discussed in another occasion) and asked him to give me a report about the changes after two weeks of continuous regimen without any palliative treatment which is used to be given in such GIT troubles. The report was decrease in the discomfort of stomach (subjective) by 80% and 50% for irritable bowel, here I want a certain point to be informed about so I insisted to ask ‘what is else’ (without giving him idea about what I need to ask about) he answered the nervousness and social intolerance decreased or improved by 10%, here I stopped, for my knowledge his social problems and discomfort are not reflection to his GIT discomfort rather to his psychic and somatic are both complications to chronic Brucella and his negative outcome with his father due to his psychological irritability (nervousness) or social excitation however mild but in long run made his father expelled him together with his new wife from the family home which is a usual and beloved custom in the patient’s community.

Discussions
If we look to the results quantitatively it may be not much where one or two mad became sound, and one young man got aware of his cause of social troubles! When we consider the cause is the complication to some organic or systemic issue, one case becomes far enough, because it reveals the true content of the matter where the wise man once said ‘“Every vessel with which it exudes”’ [https://en.wikipedia.org/wiki/ali], this means the one case is like the honey drop if comes from a jar or a pot this pot or jar should contains honey not a vinegar or so. For that we have to focus on this to see the incidence which may be more than we consider or it could be the only fact. So if it is so, why we treat symptomatically and dip deep into brain chemistry manipulation to spoil what is already spoiled by the offending microbial agent. I do not want to say, or somebody say, these principles are mentioned in textbooks of many medical arts, so nothing is new. Right, nothing is new, similar to the wheel is present in nature even before man become in use of it, petroleum was available 100 years before our eyes, before man notice it. And so, no one in the globe bother his/her self to look for any of theoretically offending microbial agents in any sample of the patients in question of this matter in any mental health institute in the world high or low in its XYZ!!! If someone do it, as a routine investigations for the same, I ask them to change to tissue sample PCR whether direct (brain) or indirect as I am now doing to take trapezius muscle open biopsy for PCR (now I am working on Brucella and I want to include more than fifteen possible intracellular bacteria but neither my financial capability permits nor the technical capacity of the specialized companies permits to develop micro-array technics to make the screen more feasible, because screen test to the biopsy with real time PCR for the fifteen or so embalmed intracellular bacteria is so costly at least at the time of these words writing, routine serology is unreliable so the castrophy happens when we obey negative results). When I say brain biopsy we need a sub-specialty level of teaching knowledges and advanced training. Now let us be back to the basics of anatomy which is here the structure, and the physiology, which is the interaction between the internal energy and the directing geometry of this structure. I would be happy if someone make me or let me know what is meant by functional disorder, is that because he/she does not see the structural abnormalities with his so sophisticated tools!!!? So let him make us able to see the atom or its nucleus!! Or the proton and better the neutrons! It is nice to link sciences with each other when Einstein’s equation of interaction between the energy E and the mass m states $E=mc^2$ (c is the light speed to power 2, square) this a fact of intact or integrative nature where no pure energy sweeps in the streets alone and no rocks (the mass m) accumulated in somewhere in Isolation or is devoid of internal energy. This make us understand or realize that nothing as a principle is available alone or in a fixed or sold state. By these simple words we admitted the mass where here it should refers to the structure forcibly into our parameters when we think about a given phenomenon. So if structure is not away from the scene we have to think in the organic more and more. According to this, my work considers the soul abnormality occurs in the structure, the structure is the sub-cellular organelles geometry which is built up of macromolecules. These macromolecules are arranged according to a certain philosophy by an inherited governing system forming the normal biological animal and plant building units, the cells. It is well known cells are subjected to many physical and chemical stresses. One of these which are causing both stresses is the intracellular pathogens, in my work which is based on clinical diagnosis and highly if not completely positive trial treatment, this pathogen is Brucella. When lately I admitted the PCR trapezius muscle open biopsy the results supported this vision to a good level (around 50% as a rate because it ranges from 25% when I were taking tissue sample from the sacroiliac joint and 80% when I shifted to take from Trapezius) many of my colleagues in spite of my obvious clinical trials results they were blaming me to be over-diagnose Brucella or Brucella minded. But when PCR at the beginning showed 25% they become so astonished and some say we are in an endemic state, so what will they say if
they knew the results become 80%, I did not reveal it because nobody took care and changed his attitude when it was 25% which made them become silent and stop blaming me. This includes the department of preventive medicine in the health directorate when I sent them the responsible employee in our hospital to tell them about the results they told the employee we will have a look on the work of Dr. Abbas Alnaji, but no response. Here the intracellular Brucella whether in the neuron, Galia or the other bodily cells when stay long they exert their effects of any kind to adapt our cell towards their needs and our cell may adapt to the invader by some means. The microbe adaptation makes it difficult to be diagnosed by the serological tests and so to be eradicated when considered as a cause. The adaptation of our cell to the invader make it walk or work in ways away from our known physiology so from this the altered function and hence any alteration up or down in medicine it means a disease, here many modalities and spectrums will be seen. For that a lot of work is needed not to consider Brucella or other intracellular bacteria are the cause behind the man’s or animal or plant diseases, now we know a lot of work to know more about the nature of this cell to cell interaction (cell of invader and cell of the host). The affected group of neurons that form a given functional anatomical entity will reflected accordingly as a given or a known clinical features of what we know. For that when there is a diffuse inflammatory affection no site in particular will manipulated to manage the given clinical entity. Just like the remote memory, no particular anatomical organ or structure is responsible for the remote memory so when there is a wide spread neuronal loss or glial deficiency or both as what is called senile dementia which should be an inherited programme neuronal or glial loss which may be quickened by the negative effect of the invader cell. The more accentuation for that is the pre-senile Alzheimer’s dementia where there is a negative outcome in the battle among the invader cell and the neuron and glial cells of course many parameters take part to such result to be obtained. When we do not think as such we will be lost in the side way paths or routes which themselves are a result or an “an accompanying phenomena”. Dementia praecox is the opposite to senile dementia where there is either no loss, rather irritability or excitation stage of the multi-location or diffuse cerebritis with exacerbation and remission state for that we see the schizophrenia patient show this great deal of swinging in severity and modality or there is a loss in counterpart cells which balance the behavior like that of pyramidal and extra-pyramidal kinetic system, this vision of loss is due to a fact deeper than that of irritability. The same as the above is drawn for other conditions of mentality aberration, mild, as recurrent neurosis, or severe as a mutism and autism.

**Conclusion**

As the mentality is part of the brain function and the brain as a configuration should be sound in its configuration to work properly. As the brain configured from cells, so cells should be sound in its build up and so the relations to the other cells (neurons) and sound in its path of glial cells skeleton or frame work, this frame work of glial cells also has its role in the well fare of brain function and hence the mentality. What affects these afore mentioned structure and geometry reflected on the function so no pure functional disorders. This is also supported by my work where several tens of different modes of mentally ill patients who are either treated before with anti-psychotics and still suffering or not treated before for any reason, when evaluated by me, I discovered a somatic features in among of mental so gave this clue of the mental deviation being a part of a general systemic chronic or sub-acute active intra-cellular bacterial infection, the mental ones are a complication not more not less.

**Recommendations**

It is highly recommended that mentally ill patients have to discover their somatic features which are if added to the mental ones we will have a general systemic affection. Absence of somatic features is due to, either we failed to discover them by or clinical art, or they are come and disappear from time to time so the history of systemic review is essential and I need to say absence of somatic features does not change this vision due to the high success rate I been blamed to be over diagnose Brucella, salmonella, lime and other intracellular bacterial chronic infections, the high percentage of tissue PCR results at least for Brucella in my work in the last three years may suggests some thing about the incidence.

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