



# Come of Madness

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# Come of Madness



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The following superscript notations are used to denote references to official *Pathfinder Roleplaying Game* rulebooks:

ACG = *Pathfinder Roleplaying Game Advanced Class Guide*  
APG = *Pathfinder Roleplaying Game Advanced Player's Guide*  
ARG = *Pathfinder Roleplaying Game Advanced Race Guide*  
GMG = *Pathfinder Roleplaying Game Gamemastery Guide*  
OA = *Pathfinder Roleplaying Game Occult Adventures*  
PU = *Pathfinder Roleplaying Game Pathfinder Unchained*  
UCam = *Pathfinder Roleplaying Game Ultimate Campaign*  
UC = *Pathfinder Roleplaying Game Ultimate Combat*  
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# WELCOME TO HORROR PLUG-INS!

This product is a part of our line of support materials for campaign play for use with campaigns using a horror theme. We anticipate all manner of exciting additions to the game when *Pathfinder Roleplaying Game Horror Adventures* is released this summer, but why wait to spring something truly horrible on your players? When you see the “Horror Plug-In” logo at the top of a Legendary Games product, you can expect it is designed to fit directly with the themes of that book, from mind-melting madness and sinister serial killers to most bloodthirsty bastards and blackguards that ever bedeviled your heroes. The all-star team of designers here at Legendary Games is committed to bringing you—the busy GM or player—the absolute best third party support for your Pathfinder campaign. To deliver on that commitment, we’ve assembled the best of the best of current gaming authors, designers and layout experts so that you can feel comfortable that Legendary Games products will be the most creative, rules-legal and well-designed content you can find anywhere.

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We’ve hyperlinked this product internally from the Table of Contents and externally with links to the official Pathfinder Reference Document as well as d20PFSRD. If it is in the core rulebook, we generally didn’t link to it unless the rule is an obscure one. The point is not to supersede the game books, but rather to help support you, the player, in accessing the rules, especially those from newer books or that you may not have memorized.

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# WHAT YOU WILL FIND INSIDE Tome of Madness

*Tome of Madness* is the definitive source for dealing with maniacal madmen and deranged villains, but also for haunted heroes and their afflicted allies whose minds have been pushed past the breaking point. This lavishly detailed tome examines the nature of mental maladies from aphasia and amnesia to phobias, tics, delusions, dyspraxia, and hysterical blindness. With over three dozen forms of insanity with varying severity and symptoms, you'll find lesser ailments that may accompany your heroes throughout their lives, as well as devastating delusions that can shatter a character's world. *Tome of Madness* goes a step further, with abundant information on the treatment of madness, including the use of alchemy and magic (and even occult faith healing) to calm the disturbed mind. Whether insanity is purely biologic or an element of addiction, brought on by gradual decline or a sudden, sharp break, you will find a wealth of information for incorporating insanity into your Pathfinder campaign in an in-depth way that does not degenerate into simple stereotypes but gives your heroes and villains alike some real depth in their disturbia!

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- Jason Nelson





# Madness: An Alternate Approach

The looming specter of madness has been a staple of horror films and literature for ages. Witness the murderous narrator of Poe's *The Tell-Tale Heart*, whose hallucinations of his victim's eponymous organ beating beneath the floorboards drive him to confess his crime. Or consider the unhinged giggles of Professor Dexter Stanley as he recounts the attack of a sharp-toothed monstrosity that emerges from an ancient crate in a chapter of the campy horror anthology *Creepshow*. And Lovecraft—heavens save us! If nothing else, Lovecraft's tales proclaim that the barrier between rationality and gibbering lunacy is paper thin, forever threatened by even the smallest glimpse of forbidden knowledge. Traditionally sanity has been represented in heroic fantasy RPGs as one more resource pool to manage, or madness as another de-buffing effect shrugged off as easily as poison or disease. But it can be *more*. The first question a GM must answer is what role should madness take in my horror campaign? Is it just one element of many, or is it a central threat endemic to the perilous endeavors your players' characters undertake? This section seeks to expand the role of madness for GMs and players who wish to make it a vital element of the story, a danger not so easily dismissed. This system can be used in part or whole, in concert with or alternative to those elements presented in the *Pathfinder Roleplaying Game Gamemastery Guide*.

## A WORD ABOUT MENTAL ILLNESS

While skulking ghouls, magic swords, and treasure hoards are things of the imagination common to RPGs, mental illness itself is very real. Many people suffer from such disorders, ranging from mild to debilitating. It isn't the purpose of this section to mirror the experience of true mental illness with perfect precision, nor is the intention to make light of conditions with which many struggle. The endeavor is to provide verisimilitude for the use of madness in the role playing experience. This information shouldn't be considered an accurate representation of such afflictions. And of course, anyone in emotional pain is encouraged to seek the assistance of trained mental health professionals.

# The Nature of Madness

"Madness" is a broad and imperfect term, with some of its manifestations far more severe than others. It's a blanket term for the diverse consequences of wear on and damage to a character's mental wellness. But damage to a creature's mental wellness can impact not only the abilities, but often the very means by which what is and isn't real is discerned. The latter is called *reality testing*: the process of employing reason and the five senses to ascertain exactly what's happening in the environment and the proper response. Nearly everything we do depends on trust in those faculties. While magic can toy with perceptions, madness truly pulls the rug out from under a character, for the distortions come from within.

Rather than present complex disorders that involve a constellation of symptoms, this chapter describes an approach involving a variety of specific symptoms of madness called **maladies**. A character may suffer from a single malady or many, depending on how profoundly sanity has been damaged.

## THREATS TO SANITY

Any creature with an Intelligence score of 3 or higher is susceptible to developing maladies. This includes creatures immune to mind-affecting effects: while they are more resistant to the effects of madness, gaining a boost to saves vs. events that threaten the development of maladies (1 + the creature's Charisma bonus), they are nonetheless vulnerable. The GM must be the final arbiter to determine what events and circumstances threaten sanity. The following are suggested sources.

**Damage to Mental Abilities:** any event that causes damage to mental ability scores—INT, WIS, and CHA—risks the development of a malady, as do attacks that drain those same abilities. Whenever a character suffers damage to or draining of these abilities, a Will save is required, the DC equal to 10 + the number of points lost. If a character suffers additional diminutions in scores before such damage/draining is repaired or restored (via *restoration* or natural healing), the Will save DC is equal to 10 + the *total* number of points lost, not just those lost in the most recent encounter. If a mental ability score is reduced to 0, the character gains no save and is at greater risk of developing a more serious malady of greater severity (see footnotes for **Tables M—1** and **M—2**).

**Magic:** Spells and spell-like abilities/effects that specifically target sanity (such as *insanity*, *symbol of insanity*) run the risk of leaving permanent mental scars: after being restored from the spell's effects, the victim must make an additional Will save (DC equal to 10 + the spell level) to avoid developing a malady.



**Divination:** Probing the mind of an insane individual is an enormous risk, potentially inflicting madness on an incautious diviner. Anyone who employs mind-affecting divination spells, spell-like abilities, or magic items duplicating such spells against a target afflicted with one or more maladies must make a Will save to avoid harm from contact with a disturbed psyche (DC equal to 10 + the target's highest mental ability score). Communing telepathically with a creature suffering from maladies may also represent a threat to one's sanity.

**Forbidden Knowledge:** Certain types of knowledge, often contained within coveted and forbidden tomes, threatens the sanity of those who expose themselves to such dangerous wisdom. In cases for which the description of the tome (or whatever medium through which a character might receive the knowledge) doesn't state a Will save DC, a determination must be made by the GM.

**Trauma:** Traumatic experiences have the potential to cause long-term mental harm. However, the GM must often determine what constitutes sufficient trauma to warrant a Will save and its DC.

**Physical:** Physical trauma sufficient to threaten sanity should generally be massive damage, injuries that threaten an individual's sense of self, or prodigious pain. For instance, if a character sustains damage greater than half her hit points in a single attack or loses an eye or limb in an encounter, or suffers agony equivalent to a *symbol of pain* spell.

**Emotional:** Adjudicating the effects of emotional trauma is trickier. Possible emotional trauma may result from witnessing a close ally's especially gruesome death or an ally dying due to the character's negligence or failure (such as a failed skill check).

**Mental:** Exposure to bizarre dimensions or alien mindscapes that violate natural laws can cause great mental strain for those unused to them. A character may normally be shaken upon leaving a strange dreamscape, but dying in a nightmare plane could cause enough distress to permanently damage the psyche. Exposure to particularly powerful haunts or psychic residue of past atrocities might also warrant a Will save to avoid developing maladies.

**Results of Exposure:** When exposed to trauma sufficient to threaten sanity, the traumatized creature must make a Will save (DC equal to 10 + Encounter CR, barring special circumstances that would alter the DC). Failure indicates that the creature's mind was unable to withstand the assault and a roll is then required on **Table 1**. The onset for all maladies is 1d20-1 hours following the affecting episode, a result of meaning onset is immediate.

**TABLE 1: EFFECTS OF SANITY THREAT**

D% <sup>1,2</sup>	RESULT <sup>3</sup>
01–05	Character suffers no additional effects.
06–08	Character assumes the shaken condition for 3d4 rounds.
09–11	Character rendered unconscious for 3d4 rounds
12–15	Character behaves as though under the effects of a confusion spell for 3d4 rounds.
16–18	Insomnia
19–22	Kleptomania
23–25	Hypochondriasis
26–28	Compulsions
29–31	Phobia, Object
32–34	Phobia, Activity/Situational
35–37	Despair
38–40	Intermittent Explosive Episodes
41–43	Alexia
44–46	Tic, Intentional Vocalization
47–49	Panic Attacks
50–52	Intentional Tremor
53–55	Tic, Chronic Vocalization
56–58	Hysterical Deafness
59–61	Tic, Chronic Motor
62–64	Hysterical Blindness
65–67	Delusions, Erotomaniac
68–70	Aphasia
71–73	Dyspraxia
74–76	Amnesia, Anterograde
77–79	Amnesia, Retrograde
80–82	Hallucinations, Gustatory
83–85	Hallucinations, Olfactory
86–88	Manic Episodes
89–91	Paranoid Ideation
92–94	Schizophasia
95–97	Delirium
98–100	Akinetopsia
01–03	Delusions, Grandiose
04–06	Formication
07–09	Hallucinations, Auditory
10–12	Hallucinations, Visual
13–15	Hallucinations, Command
16–18	Catatonic Stupor



<sup>1</sup> For results greater than 15, an additional roll on **Table 2** is required.

<sup>2</sup> For every mental ability score reduced to 0, add 15 to the result.

<sup>3</sup> For characters with a pre-existing mild or moderate malady, a result in the 6–15 range indicates that the existing condition has worsened by one step.

**TABLE 2: SEVERITY**

d10 <sup>1</sup>	RESULT <sup>2</sup>
1–5	Mild
6–8	Moderate
9–10	Severe

<sup>1</sup> For every mental ability score reduced to 0, add 4 to the result.

<sup>2</sup> For maladies with a severity range that doesn't span the full continuum (mild to moderate or moderate to severe), treat a result outside the range as moderate.

## Maladies

Below are descriptions of many forms of madness, both neuroses and psychoses. Some of these maladies fall into broader categories, which are discussed first. Those maladies requiring creative input from the GM (that is, conditions for which the GM must flesh out details) are marked with an asterisk.

**Amnesia:** Amnesia is an overarching term for maladies involving problems with retrieving old memories or developing new ones. Role playing memory loss is problematic at best: how does one believably pretend not to know something? As a result, the two types of amnesia described here are less severe conditions more amenable for roleplay. For a more all-encompassing form of amnesia, see *Maladies for NPCs* below.

**Delusions:** Delusions are strongly held beliefs for which there is no external reality validating the passion with which afflicted individuals hold them. Essentially the creation of the afflicted's mind, oftentimes perceptions and information are unwittingly distorted so as to support the irrational beliefs.

Delusions depend mightily on the GM to flesh out and make real for the player, and this is done in part by providing that player with false information. For instance, if a character survives an encounter with a Wisdom-damaging creature and ends up with moderate grandiose delusions as a result, inform the player that the character somehow inherited new or improved skill bonuses or other abilities somehow connected to the slain creature: “By slaying this allip you have gained an incredible subtlety and lightness of step (this



translates to a +6 bonus to Stealth checks); or “Undead now fear you. When you encounter any undead creatures of equal or lower CR, you may turn them as though you were a cleric with that feat.” When the character attempts such a feat and fails, this can be blamed on the monster's Will save or some other extraneous factor. If the player starts voicing disbelief in the alleged abilities or skills, a Will save is required to actually disregard the belief in the moment; otherwise the character insists on employing this nonexistent ability or skill in circumstances that fit the exercise thereof. Two types of delusions are detailed here to afflict PCs, though several other types exist.

**Dementia:** Dementia encompasses a number of conditions, usually the result of brain damage or deterioration. For the purposes of roleplay, forms of dementia are reimaged here as episodic to chronic conditions affected by periods of stress.

**Hallucinations:** Hallucinations are perceptions in one of the five senses created by the afflicted character's own mind. Their reality is as compelling for the sufferer as any other sensory perception and are thus very difficult to disregard. Hallucinations don't combine sensory modalities; that is, a hallucination doesn't have both auditory and visual components. Of course, a character afflicted with both types of hallucinations could experience the two simultaneously—they would simply not be working in concert.



**Phobias:** A phobia is an outsized, recurrent fear of an activity, situation, or object that creates powerful dread in the sufferer as well as a strong compulsion to avoid it or flee. Naturally anyone would experience fear in circumstances met routinely by characters in fantasy RPG—giant vermin, demons from the Abyss, stalking undead. For a character afflicted with a phobia, however, that fear is pathological in its intensity, affecting the ability to face fear and function in an encounter. A phobia might be very specific. For instance, a pathological fear of vampires. However, this circumscribed phobia may grow more generalized over time, eventually encompassing all corporeal undead. Phobias most often arise out of traumatic exposure to the feared activity/object/situation. Perhaps one's life was threatened by the phobia's focus, or the frightening exposure occurred at a crucial stage of a character's formative years.

The severity of the phobia determines how difficult it is for the character to function in those circumstances. The phobic activity/object/situation conjures up a primordial urge within the afflicted character to flee—the action is so primitive that it's conceivable an afflicted individual bull rushes allies out of the way in order to retreat. When flight is impossible, the fear paralyzes the sufferer or promotes some irrational, potentially dangerous reaction. For example, if a character has a fear of heights (acrophobia), an initial failed Will save means that the afflicted individual simply refuses to walk across the narrow ledge above the chasm. However, if the afflicted character succeeds on the first Will save and the crossing requires three rounds, failing on the second Will save means the sufferer becomes paralyzed half way across the gap, or impulsively grabs hold of the ally next to her. As always, the GM must adjudicate each situation, keeping these things in mind.

**Tics:** Tics are involuntary nervous movements or vocalizations that are recurrent and odd to those who witness them. As a result, those who interact with a character so afflicted tend to assume sufferers are somehow strange, untrustworthy, or potentially dangerous. Tics are typically caused by mental trauma or damage done to the brain by substance abuse.

Due to their involuntary nature tics are difficult to control. Those attempting to suppress such symptoms must devote all of their focus to the purpose unless aided by alchemical agents or magical assistance. Attempting to do so is a full round action and can be continued as long as the afflicted individual desires, so long as she is able to make Will saves each round. Successfully suppressing a tic reduces it one level of severity, with mild tics rendered undetectable. A chronic tic's effects simply resume at their normal intensity as soon as the character stops suppressing it, but with a triggered (intentional) tic there is rebound, and it becomes chronic for a full 1d4+6 minutes, regardless of what activity follows.

## TERRIFIED

Terrified is a new condition affecting those suffering from some maladies. A terrified character is so overwhelmed by fear she becomes physically paralyzed, unable to act in nearly any way. The character can stutter a single word if she can succeed on a DC 24 Will check, but no more. Even in a dangerous situation, such as crossing a narrow ledge over a precipitous drop, the character freezes in place. If an ally is in an adjacent square, the character must make a DC 24 Will save to avoid taking the irrational action of attempting to grapple the ally. This is true even if this could prove potentially fatal for both characters. An ally may attempt to break the character out of the terrified condition through a successful DC 24 Heal check, but this is a full round action.

## ELEMENTS OF MALADIES

Maladies have the following elements: type, save DC, trigger, duration, and effect.

### TYPE

Maladies are classified as either a neurosis or a psychosis.

**Neurosis:** Also known a “nervous” condition, neuroses are more common mental afflictions that affect an individual's emotional state and functioning. Generally more easily managed than psychotic conditions, neuroses are also more amenable to control and cure.

**Psychosis:** A psychotic condition is a more profound mental disturbance that affects the afflicted individual's perception of reality and/or profoundly impairs functioning. It's also generally much more resistant to efforts at control or cure.

### SEVERITY

Most maladies have a range of severity representing its strength and the nature of its effects. While most forms range from mild to severe, some have a narrower continuum.





## SAVE

Listed here is the Will save DC for resisting the effects of the malady (when possible) and warding off a worsening of the condition. The entries are listed as *DC (mild)/(moderate)/(severe) Will*.

## TRIGGER

A trigger refers to the circumstances wherein a malady manifests its effects. When a trigger occurs, the afflicted individual must make a Will save to avoid manifestation of the malady. Chronic maladies don't have triggers.

**Proximity:** Maladies triggered by proximity are those tied to specific objects, locations, or situations (being in a graveyard at night).

**Random:** Some maladies are extremely unpredictable, triggered seemingly at random. The character must make a Will save every hour to determine if the malady asserts its effects.

**Stressor:** The most common trigger, maladies triggered by stressors are those which manifest during encounters that potentially impact the status or well-being of the afflicted character or allies. At the outset of the stressor the character must make a Will save to determine if the malady asserts its effects. Stressors include combat, disarming a trap, engaging in an act requiring a skill check, encountering a haunt, or other circumstances at the GM's discretion.

## DURATION

The length of time the ill effects of a malady last when triggered. The effects of chronic maladies are always active.

## EFFECT

The effect of a malady is how it alters the afflicted character's behavior, perceptions, and experiences when triggered. While many maladies cause penalties to various checks, they also produce effects that can directly affect the storyline due to a character's altered perceptions and impaired reality testing. Effects can differ not only by intensity across levels of severity, but in the way they manifest.

## SPECIFIC MALADIES

### AKINETOPSIA (DEMENTIA)

**Type:** psychosis; **Severity** mild to severe; **Save** DC 20/23/26 Will

#### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

**Mild**—The afflicted character suffers a -2 penalty to AC, as well as Acrobatic checks and Reflex saves involving movement (for instance, attempting to grasp a swinging rope or grabbing a ledge to avoid falling into a pit). The same -2 penalty applies to any attack roll in which the target is in motion or Disable Device checks on targets with moving parts.

**Moderate**—As mild, save that the penalty is -4.

**Severe**—As mild, save that the penalty is -6.

#### DESCRIPTION

A character suffering akinetopsia, also known as motion blindness, has great difficulty perceiving movement. This has a significant impact on any activity involving hand-eye coordination and judging the movement of targets.

### ALEXIA (DEMENTIA)

**Type:** psychosis; **Severity** mild to severe; **Save** DC 15/19/23 Will

#### EFFECTS

**Trigger** special; **Duration** chronic

#### Effect

**Mild**—The afflicted character must make a Will save when doing any sort of reading or deciphering of symbols, failure indicating that she is unable to decode the text. If the save is successful, any check required with the reading is made at -1.

**Moderate**—As mild, save that subsequent checks are made at -2.

**Severe**—As mild, save that subsequent checks are made at -3.

#### DESCRIPTION

A character suffering from alexia is experiencing impairment in the ability to recognize letters and pictographic writing. As a result, any activity that requires reading, interpreting symbols, or the like requires a Will save to succeed in addition to any skill checks normally associated with the act, which are also performed with a penalty.

### AMNESIA, ANTEROGRADE

**Type:** psychosis; **Severity** moderate to severe; **Save** DC 22/26 Will

#### EFFECTS

**Trigger** —; **Duration** chronic

**Effect** When leveling up, a character suffering from this form of amnesia doesn't gain any new abilities, skills, or spells. Casters who memorize spells daily must make a Will save in order to commit each spell known before onset of the amnesia to that day's repertoire.

#### DESCRIPTION

This malady affects the afflicted character's ability to form new memories. As a result, at an opportunity to level up she doesn't gain the benefit of new skills, spells, and abilities. Skills, spells, and abilities already known before the onset of the amnesia are unaffected by it, with improvements in those abilities determined by level increasing normally.





## AMNESIA, RETROGRADE

**Type:** psychosis; **Severity** mild to severe; **Save** DC 16/19/22 Will

### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

*Mild*—The afflicted individual takes a -2 penalty to all Appraise, Knowledge, Spellcraft, and Use Magical Device skill checks. Casters who rely on memory for spells must make a Will save to avoid spell failure when casting.

*Moderate*—As mild, save that the afflicted individual takes a -4 skill check penalty.

*Severe*—As mild, save that the afflicted individual takes a -6 skill check penalty.

### DESCRIPTION

This malady affects the afflicted character's ability to retrieve memories. While the ability to form new memories is unimpaired, recalling them later is still affected.

## APHASIA (DEMENTIA)

**Type:** psychosis; **Severity** mild to severe; **Save** DC 14/17/20 Will

### EFFECTS

**Trigger** —; **Duration** chronic

**Effect** Whenever listening to a speaker who is employing a language other than the afflicted's native tongue, a Will save is required to determine if the character is able to comprehend what is said.

### DESCRIPTION

Characters with aphasia have difficulty understanding spoken language. When listening to a speaker who is employing a language other than the afflicted individual's native tongue, a Will save is necessary to determine if she can comprehend what is spoken. Strangely enough, reading comprehension is unaffected by this malady.

## \*COMPULSIONS

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/14/16 Will

### EFFECTS

**Trigger** proximity or stressor; **Duration** until the compulsion is indulged or following 3 consecutive Will saves

#### Effect

*Mild*—The afflicted character assumes the shaken condition (with an additional -1 penalty to Perception checks due to distraction) until the compulsive behavior is executed, which occupies a full round action.

*Moderate*—The afflicted character assumes the shaken condition (with an additional -3 penalty to Perception checks) until the compulsive behavior is executed, which occupies 2 full round actions.

*Severe*—The afflicted character assumes the shaken condition (with an additional -5 penalty to Perception checks) until the compulsive behavior is executed, which occupies 4 full round actions.

### DESCRIPTION

A compulsion is a repetitive, often nonsensical behavior a character feels deeply compelled to perform in order to reduce a sudden surge of overwhelming anxiety. The time consumed by the behavior, whether a physical act (hand washing, touching an object a number of times, making a series of gestures) or mental act (counting bricks in a wall, repeating a specific phrase mentally), is dependent on the severity of the compulsion.

## CATATONIC STUPOR

**Type:** psychosis; **Severity** mild to severe; **Save** DC 17/21/25 Will

### EFFECTS

**Trigger** stressor; **Duration** varies

#### Effect

*Mild*—The afflicted assumes a condition of near immobility for 6d6+4 rounds, during which she is almost completely unresponsive to external stimuli, even to the point of total passivity when being attacked. The sufferer assumes the helpless condition while catatonic, but may be roused to consciousness by an ally succeeding on a DC 20 Heal check, though the effort to do so is a full round action requiring 1d3+1 rounds.

*Moderate*—As mild, save that the episode lasts 2d6+4 minutes. The sufferer may be roused from the condition by an ally succeeding on a DC 28 Heal check, though the effort itself requires 1d3 minutes.

*Severe*—As mild, save that the episode lasts 2d6 hours. The sufferer may be roused from the condition by an ally succeeding on a DC 36 Heal check, though the effort itself requires 10-30 minutes.

### DESCRIPTION

This severe condition of unresponsiveness leaves the sufferer apparently oblivious to all external stimuli, drooling and staring off into space, glassy-eyed. The sufferer may be curled into a ball on the ground or remain in the same position for the duration of the episode. The condition is almost indistinguishable from unconsciousness, save for two odd features. First, catatonic characters assume waxy flexibility: they can be positioned by another into a pose which is then held indefinitely. And second, the individual may repeat a phrase in a murmuring, barely audible tone. Another individual can actually cause a catatonic individual to repeat a phrase of her choosing by whispering the words several times in the ear of the afflicted and succeeding on a DC 20 Charisma check.

**Note:** If a character afflicted with catatonia has a mental ability score reduced to 0, the catatonic state becomes a permanent one from which she cannot be roused until the ability score is fully restored.







## DELIRIUM

**Type:** psychosis; **Severity** mild to severe; **Save** DC 16/20/24 Will

### EFFECTS

**Trigger** stressor; **Duration** 3d4 rounds

#### Effect

*Mild*—During the episode, all Reflex saves, Initiative rolls, skill checks, and saves vs. enchantment and illusion magic are made at -2. Casters also have a 20% chance of spell failure and using scrolls is problematic as well, with a 20% chance the spell fails and the item is wasted.

*Moderate*—As mild, save that the penalty is -4 and scroll/spell failure is 40%.

*Severe*—As mild, save that the penalty is -6 and scroll/spell failure is 60%.

### DESCRIPTION

Delirium involves an episode of disturbed consciousness and focus, affecting the sufferer's thinking, attention, and memory. An individual experiencing delirium may not necessarily recognize her impairment during the episode unless she succeeds on a DC 25 Perception check

**Note:** If a character afflicted with delirium has a mental ability score reduced to 0, the delirium is permanent until the ability score is fully restored.

## \*DELUSION, EROTOMANIC

**Type:** psychosis; **Severity** mild to severe; **Save** none (see below)

### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

*Mild*—The afflicted insists on taking the lead in any diplomatic effort, negotiation, or bluff attempt unless an ally can dissuade her successfully—this requires a Diplomacy check (DC equals 8 + the afflicted character's Charisma score). The character makes all social skill checks at a -4 penalty.

*Moderate*—As mild, save that the Diplomacy check DC to dissuade the afflicted is 10 + the afflicted character's Charisma score.

*Severe*—As mild, save that the Diplomacy check DC to dissuade the afflicted is 12 + the afflicted character's Charisma score.



## DESCRIPTION

A character with erotomanic delusions mistakenly believes that she possesses overwhelming charm and is thus especially persuasive and irresistible to others. As a result, in situations calling for inducement and diplomacy, she insists on being the group's representative. In truth, the character's arrogance and overconfidence actually impairs such interactions. Characters with erotomanic delusions can cause rather uncomfortable situations to escalate to outright hostilities by disregarding social norms. For instance, boldly approaching a person of considerably higher social standing in violation of etiquette or even local laws might result in unwanted attention or rebuke. Such a character is also likely to suggest negotiation or diplomacy in circumstances where the level of hostility wisely counsels otherwise.

## \*DELUSIONS, GRANDIOSE

**Type:** psychosis; **Severity** mild to severe; **Save** DC 18/22/26 Will

## EFFECTS

**Trigger** —; **Duration** chronic

**Effect** The afflicted believes that she possesses special powers and abilities and insists on exercising those powers when an opportunity presents itself unless disbelief is verbalized and a Will save is made.

## DESCRIPTION

A character with grandiose delusions mistakenly believes that she has powers or abilities not truly possessed. When an opportunity occurs in which the character might exercise this skill or ability, she insists on employing it unless she verbalizes disbelief and succeeds on a Will save. Needless to say, such delusions can place the afflicted individual and her allies in potentially deadly situations. The GM is responsible for tailoring the delusional belief to the circumstances in which the malady formed.

## DESPAIR

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/15/18 Will

## EFFECTS

**Trigger** —; **Duration** 24 hours

## Effect

**Mild**—The afflicted character suffers a -1 penalty to all saving throws, Initiative checks, and Charisma-based skill checks. However, a natural cynicism makes the afflicted character less susceptible to deception, gaining a +1 bonus to opposed Sense Motives checks.

**Moderate**—As mild, save that the penalty is increased to -2. Also, when confronted by an obvious danger, the character must make a Will save or succumb to self-destructive impulses to seek it out. In a combat situation this means getting in the front lines and fighting recklessly, resulting in a -2 penalty to AC. Allies may attempt to restrain the character: this provides a renewed save opportunity to resist the harmful impulse.

**Severe**—As moderate, save that the penalty is increased to -3. In addition to recklessness in danger, following an intense encounter (such as a combat encounter lasting more than 2 rounds), the afflicted character must make a Will save each round or deal 1d8 points of damage plus Strength modifier to self with any item at hand. Restraint by allies provides an additional save attempt, the episode of self-harm lasts 2d4+2 rounds otherwise.

## DESCRIPTION

A character suffering from despair experiences despondency and ennui that significantly impacts functioning, perhaps even sapping the will to live. Each morning the afflicted character must make a Will save or suffer the effects of despair for a full day.

## DYSPRAXIA (DEMENTIA)

**Type:** psychosis; **Severity** mild to severe; **Save** DC 14/17/20 Will

## EFFECTS

**Trigger** special; **Duration** varies

**Effect** Whenever a character attempts to employ speech, a Will save is required to determine if what comes out is unintelligible gibberish. This would prevent the casting of spells with verbal components.

## DESCRIPTION

A character afflicted with dyspraxia has difficulty articulating speech, rendering them essentially mute when the malady asserts itself. If a character wishes to speak for any reason, a Will save is required. Failure indicates that the afflicted may not attempt to do anything involving speech for 1d4 rounds, after which another Will save is possible. Strangely enough, a bard's ability to sing is unimpaired by this malady, though any other verbal performance (such as comedy or oratory) is.

## FORMICATION

**Type:** psychosis; **Severity** mild to severe; **Save** DC 15/20/25 Will

## EFFECTS

**Trigger** stressor; **Duration** varies

## Effect

**Mild**—When triggered and the Will save is failed, a character with formication begins scratching roughly at her flesh. The distraction and emotional strain of the experience causes the afflicted to suffer a -1 penalty to all skill checks, attack and damage rolls, Initiative checks, and double that for all Charisma-based skill checks. Even when the formication isn't active, Charisma-based checks are still made at -1 if the afflicted individual's abrasions from chronic scratching are visible. The episode lasts 2d4 rounds.

**Moderate**—As mild, save that the penalty is -2 (-4 for Charisma-based skill checks) and the episode lasts 3d4 rounds. Furthermore, during and after an episode, the afflicted suffers 1 point of bleed damage from the severe abrasions and lacerations caused by the scratching until the wounds can be tended or a period matching the episode's length has passed.



**Severe**—As moderate, save that the penalty is -4 (-8 for Charisma-based skill checks) and the episode lasts 4d4 rounds. Furthermore, during an episode, the afflicted suffers 1d2 points of damage per round from her attempts to root out the hallucinatory vermin, and 1 point of bleed damage from the severe abrasions and lacerations caused by the scratching until these wounds can be tended or a period matching the episode has passed. There is also a 10% chance during an episode that the afflicted inadvertently cuts an artery, causing 1d4+3 points of bleed damage a round until the wound is healed or the afflicted dies.

#### DESCRIPTION

A character experiences tactile hallucinations, the unnerving sensation of bugs or worms crawling beneath the surface of her skin. So real is this sensation that in extreme cases a character will abrade and cut her own flesh to get at the insidious vermin thought to lurk within.

### \*HALLUCINATIONS, AUDITORY

**Type:** psychosis; **Severity** mild to severe; **Save** DC 16/21/26 Will

#### EFFECTS

**Trigger** special; **Duration** varies

#### Effect

**Mild**—The character suffers a -1 penalty to all Initiative and Perception checks, as well as any other activity that requires focused attention (such as disabling a trap or casting a spell).

**Moderate**—As mild, save that the penalty is -3 and once per hour the afflicted must make a Will save to resist the urge to shout for the voices to “shut up” or otherwise argue back, which can make for rather awkward social situations.

**Severe**—As moderate, save that rather than resist an urge to yell back at the voices, the afflicted instead carries on a conversation with these imagined voices, whispered if the character knows she’s in the presence of others. Furthermore, when others are speaking, the voices inform the afflicted that the speaker is somehow untrustworthy or lying, making all Bluff or Diplomacy checks with such a character more difficult (-4 penalty).

#### DESCRIPTION

Auditory hallucinations are sounds or voices that have the quality of reality and are experienced outside the afflicted individual’s head, as any other sound is experienced. These hallucinations vary widely in what triggers them, as well as their duration and nature, based on severity. Note that the GM must employ creativity in describing the hallucinations, drawing from a theme or specific threats the PCs have discussed facing.

**Mild:** The afflicted hears vague, muffled whispering with great frequency that she cannot comprehend, resulting in chronic distraction.

**Moderate:** The afflicted hears voices carrying on a demeaning, negative running commentary on her behavior.

**Severe:** As moderate, save that in addition to the negative commentary, the voices also verbalize paranoid thoughts about any other persons who are speaking (including allies), suggesting that they are untrustworthy or lying.

### HALLUCINATIONS, COMMAND

**Type:** psychosis; **Severity** mild to severe; **Save** DC 15/20/25 Will

#### EFFECTS

**Trigger** stressor; **Duration** until resisted, the character restrained, or 2 consecutive saves are made

**Effect** Compelled by authoritative voices, the afflicted creature must make a Will save or either self inflicts 1d8 points of damage per round with whatever is at hand or physically attacks the nearest creature (including a familiar) until 2 consecutive Will saves are made or restrained by allies.

#### DESCRIPTION

A subtype of auditory hallucination, a character experiencing command hallucinations hears insistent, compelling voices directing them to violent acts, either to harm another or themselves (equal chance). The afflicted may try to resist the command with a Will save, breaking the hallucination, but leaving the creature shaken for 1d4+2 rounds.





### \*HALLUCINATIONS, GUSTATORY

**Type:** psychosis; **Severity** mild to severe; **Save** DC 15/20/25 Will

#### EFFECTS

**Trigger** stressor; **Duration** 2d6+3 rounds

#### Effect

*Mild*—The afflicted experiences a powerfully unpleasant psychogenic taste and is sickened for the duration of the hallucination.

*Moderate/Severe*—As mild, save that each round the afflicted must make a Fortitude save equal to the Will DC to prevent themselves from vomiting and assuming the nauseated condition for that round.

#### DESCRIPTION

During times of stress, the afflicted individual's mouth experiences a flooding of some extremely repellent taste, sickening her and potentially leading to bouts of debilitating nausea.

### \*HALLUCINATIONS, OLFACTORY

**Type:** psychosis; **Severity** mild to moderate; **Save** DC 15/20 Will

#### EFFECTS

**Trigger** random and stressor; **Duration** 2d6+3 rounds

#### Effect

*Mild*—The afflicted experiences a powerfully unpleasant psychogenic odor and as a result is sickened for the duration of the hallucination and otherwise takes an additional -1 penalty to Perception checks. Creatures who rely on scent for tracking are unable to employ this skill when experiencing these hallucinations.

*Moderate*—As mild, save that each round the afflicted must make a Fortitude save equal to the Will DC to prevent themselves from becoming nauseated for that round.

#### DESCRIPTION

During times of stress and also seemingly at random, the afflicted individual experiences an extremely unpleasant odor—rotting flesh, offal, ammonia, burning hair, vomit, etcetera. Once per hour and at the beginning of any stressor, the afflicted must make a Will save or experience the hallucination and suffer its effects.

### \*HALLUCINATIONS, VISUAL

**Type:** psychosis; **Severity** mild to severe; **Save** DC 15/20/25 Will

#### EFFECTS

**Trigger** varies; **Duration** varies

#### Effect

*Mild*—Once per hour or during times of stress the afflicted must make a Will save or experience vague, peripheral hallucinations. Due to this unnerving distraction, the afflicted suffers a -2 penalty to all concentration, Perception, and Initiative checks.

*Moderate*—As mild, save that during times of stress the hallucination is front and center and takes on a threatening demeanor. The character feels compelled to focus attacks on this non-existent creature until it vanishes 2d4+2 rounds later. If the PC verbalizes disbelief, a Will save is required to successfully ignore the hallucination, which dissipates 1d4+1 rounds later. Note that real creatures in close proximity of the hallucination may be inadvertently harmed by the afflicted individual's attacks.

*Severe*—As moderate, save that the terror generated by this more vivid and "real" hallucination is such that the afflicted also assumes the shaken condition during the hallucination's existence.

#### DESCRIPTION

A character with visual hallucinations sees things that have the appearance of reality, but are in fact creations of the mind. These hallucinations vary widely in appearance, and thus the GM must employ creativity in describing them, drawing from a theme or specific threats the PCs have faced or anticipate facing.

*Mild:* The afflicted experiences passing forms or shadows in the periphery of her vision, both at random and during episodes of significant stress. These work best if the GM first asks the player for a Perception check, reporting the hallucination as a real thing.

*Moderate & Severe:* The afflicted experiences random peripheral hallucinations (as above), but also witnesses a threatening form advancing menacingly upon her during times of stress.





## HYPOCHONDRIASIS

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/15/18 Will

### EFFECTS

**Trigger** proximity; **Duration** Until indulged or 2 consecutive Will saves

### Effect

*Mild*—The afflicted character assumes the sickened condition and seeks out healing or aid for imagined or exaggerated injuries or illness.

*Moderate*—As mild, save that the penalty for the sickened condition is -3.

*Severe*—The afflicted character assumes the nauseated condition and seeks out healing or aid.

### DESCRIPTION

This malady exaggerates an afflicted character's concern for health and well-being. Unless a Will save is made, whenever the character witnesses another with an injury or illness requiring treatment, or hears discussion of some disease, she experiences deep distress until aid is received comparable to what the injury or disease would normally require. This includes any healing measure such as remove disease, channeling of positive energy, neutralize poison, restoration, or the like. The afflicted can be temporarily mollified by a lesser measure (say, cure light wounds), but 1d4 rounds later another Will save must be made or the distress returns.

## HYSTERICAL BLINDNESS

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/15/18 Will

### EFFECTS

**Trigger** stressor; **Duration** varies

### Effect

*Mild*—The afflicted character assumes the blinded condition for 1d6+4 rounds or until 2 consecutive Will saves are made, whichever comes first.

*Moderate*—As mild, save that the character is blinded for 1d4+6 minutes or until 3 consecutive Will saves are made.

*Severe*—As mild, save that the character is blinded for 1d4+1 hours or until 3 consecutive Will saves are made.

### DESCRIPTION

Sufferers of this malady experience psychogenic blindness under stressful circumstances. While there is no physiological reason for this loss of vision, there is no practical difference between this condition and actual blindness.

## HYSTERICAL DEAFNESS

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/15/18 Will

### EFFECTS

**Trigger** stressor; **Duration** varies

### Effect

*Mild*—The afflicted character assumes the deafened condition for 1d6+4 rounds or until 2 consecutive Will saves are made, whichever comes first.

*Moderate*—As mild, save that the character is deafened for 1d4+6 minutes or until 3 consecutive Will saves are made.

*Severe*—As mild, save that the character is deafened for 1d4+1 hours or until 3 consecutive Will saves are made.

### DESCRIPTION

Sufferers of this malady experience psychogenic deafness under stressful circumstances unless a Will save is made. While there is no physiological reason for this loss of hearing, there is no practical difference between this condition and actual deafness.

## INSOMNIA

**Type:** neurosis; **Severity** mild to severe; **Save** DC 15/18/21 Will

### EFFECTS

**Trigger** special; **Duration** Until the character has a full night's undisturbed sleep

### Effect

*Mild*—Unless the afflicted makes her Will save, she doesn't benefit from some of sleep's restorative effects (such as natural healing of hp and ability damage). During the following day the character suffers -1 penalty to all Intelligence-based skill checks, Initiative checks, and Will saves. Spells normally recovered during sleep have a 10% chance of failure when cast. After 3 consecutive days of such disturbed sleep the condition escalates to moderate.

*Moderate*—As mild, save that the penalties increase to -2 and include all skill checks and spell failure increases to 20%. There is also a 10% chance during stressful events the afflicted experiences mild visual hallucinations. After 3 consecutive days of such disturbed sleep the condition escalates to severe.

*Severe*—As mild, save that the penalties increase to -3 and the chance of spell failure is 30%. There is also a 25% chance during stressful events the afflicted experiences moderate visual hallucinations. After 3 consecutive days of such disturbed sleep the afflicted begins suffering 1d3 points of Charisma damage during each restless night.

### DESCRIPTION

Insomnia is disturbed sleep during which the sufferer doesn't benefit from the full recuperative effects of a night's rest. Indeed, what sleep the afflicted catches is plagued by bizarre and disturbing nightmares.

## INTENTIONAL TREMOR

**Type:** neurosis; **Severity** mild to severe; **Save** DC 14/17/20 Will

### EFFECTS

**Trigger** special; **Duration** 2—5 rounds after the triggering behavior ends



### Effect

*Mild*—The afflicted character suffers a -2 penalty on all Dexterity-based skill checks.

*Moderate*—As mild, though penalties to skill checks are -4, and the character suffers a -2 penalty to all ranged attacks. There is also a 20% chance of spell failure when casting spells with somatic components.

*Severe*—As mild, though penalties to skill checks are -6, the ranged attack penalty is -4, and the chance of spell failure when casting spells with somatic components is 50%.

### DESCRIPTION

Intentional tremors are focused in the hands of the afflicted, similar to chronic tics, save that the tremulousness is triggered by activities involving planned actions. If a character intends to employ some Dexterity-based skill, cast a spell, or make a ranged attack, she must also make a Will save or the effects of the tremor emerge. Intentional tremors cannot be suppressed once triggered. Rather, they cease 1d4+1 rounds after the character abandons or completes the triggering act.



## INTERMITTENT EXPLOSIVE EPISODES

**Type:** neurosis; **Severity** mild to severe; **Save** DC 13/16/19 Will

### EFFECTS

**Trigger** stressor; **Duration** varies

### Effect

*Mild*—The afflicted becomes filled with unreasoning fury for 1d2+1 rounds. The effect is similar to a barbarian's rage, with the following adjustments: 1) the afflicted has no control over the episode's termination; 2) the morale bonus to Strength and Constitution is +2; 3) there is no Will save bonus; and 4) when the episode is over the afflicted character is exhausted for a number of rounds equal to twice the length of the episode's duration. Characters with a natural rage ability are only fatigued afterwards, but the number of rounds the episode lasted are deducted from the rounds the character can employ the rage ability. Also, all Charisma-based checks are made at -2.

*Moderate*—As mild, save that the fury lasts 1d4+3 rounds and the morale bonus to Strength and Constitution is +4 and the social skill penalty is -4. Also, each round in a combat situation there's a 25% chance that the afflicted character unknowingly strikes out at the nearest ally rather than an enemy.

*Severe*—As moderate, save that the fury lasts 2d4+4 rounds, the social skill penalty is -6, and there is a 40% chance each round the afflicted character unknowingly strikes out at the nearest ally rather than an enemy.

### DESCRIPTION

This malady afflicts the sufferer with unpredictable episodes of uncontrolled fury. During a combat situation such episodes may actually aid in the encounter, though the afflicted may unwittingly harm an ally instead. Of course, any sort of social interaction can certainly spin out of control if an afflicted individual experiences an episode.

## KLEPTOMANIA

**Type:** neurosis; **Severity** mild to moderate; **Save** DC 12/15

### EFFECTS

**Trigger** proximity; **Duration** Until indulged or 2 consecutive Will saves

### Effect

*Mild*—The afflicted assumes the sickened condition.

*Moderate*—As mild, save that the penalty for the sickened condition is -3.

### DESCRIPTION

This malady involves a powerful compulsion to steal objects of little or no worth to the afflicted character that is alleviated for a time if the unbidden impulse is indulged. The sufferer feels an equally strong desire to keep a stolen object, regardless of its value. In time the collection of meaningless pilfered belongs becomes quite sizable.





## MANIC EPISODES

**Type:** psychosis; **Severity** mild to severe; **Save** DC 16/22/28 Will

### EFFECTS

**Trigger** random; **Duration** 2d12 hours

#### Effect

*Mild*—The afflicted character gains a +2 bonus to Initiative checks and is immune to the fatigued condition. However, due to the reckless impulsiveness and impaired judgment, the character also suffers a -2 penalty to AC and all Charisma-based checks. In combat a save must be made for the afflicted to resist an urge to fight in the front lines.

*Moderate*—As mild, save that the bonus and penalties are +3/-3.

*Severe*—As mild, save that the bonus and penalties are +4/-4.

### DESCRIPTION

A period of increased energy, poor impulse control, and impaired judgment lasting 2-24 hours. Checks for an episode are made three times a day (morning, noon, and night).

## PANIC ATTACKS

**Type:** neurosis; **Severity** mild to severe; **Save** DC 13/16/19 Will

### EFFECTS

**Trigger** proximity (cued) or random (uncued); **Duration** until the afflicted character makes 3 consecutive saves or 15 minutes passes

#### Effect

*Mild*—The afflicted character assumes the shaken condition. If the character rolls a natural 1 on any Will save, the episode escalates to moderate and the 15-minute time is reset. The episode is followed by a period of fatigue equal to the time the panic attack lasted. (A character with cued attacks also has a 5% chance every waking hour to experience an uncued attack.)

*Moderate*—The afflicted character assumes the frightened condition and attempts to flee the trigger situation/location. If unable to flee, the character assumes the panicked condition. If the character rolls a natural 1 on any Will save, the episode escalates to severe and the 15-minute time is reset. The episode is followed by a period of fatigue equal to the time the panic attack lasted. (A character with cued attacks [see below] also has a 10% chance every waking hour to experience an uncued attack.)

*Severe*—The afflicted character assumes the panicked condition. If the character rolls a natural 1 on one of the Will saves, the character assumes the terrified condition for 3d4 rounds. The episode is followed by a period of fatigue equal to the time the panic attack lasted. (A character with cued attacks also has a 15% chance every waking hour to experience an uncued attack.)



### DESCRIPTION

Panic attacks are potentially debilitating episodes of overwhelmingly intense anxiety. Attacks are either cued—seemingly elicited by specific situations—or uncued, seeming to come out of nowhere. Unless an encounter indicates otherwise, a character's first panic attack is always uncued. Monitor if the player enquires about what caused the episode: was it this or that cue that caused it? If the character then fails a Will save, all future attacks are cued by the verbalized speculations. When a character experiences a panic attack, rather than informing her of that fact, describe the symptoms, noting a trigger only if the attacks are cued: "As soon as you enter the crowded bazaar, your heart begins pounding, you feel a stabbing pain in your chest, you're short of breath, and sweating profusely." Panic attacks are the only malady that can shift severity within a single episode.

**Cued:** A sudden episode of extreme anxiety that seems to come in response to some specific disconcerting, frightening, or stressful situation. When exposed to the fear cue, the character must make a Will save to avoid entering a panic episode. Once the panic attack has commenced, the afflicted individual must make 3 successful Will saves to get the overwhelming anxiety under control. The episode is followed by a period of fatigue.

**Uncued:** A sudden episode of extreme anxiety that seems to have no apparent cause. The episode is otherwise identical to cued attacks. A person with uncued panic attacks must make a Will save every waking hour to determine if an attack commences.

### \*PARANOID IDEATION

**Type:** psychosis; **Severity** mild to severe; **Save** DC 13/19/25 Will

#### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

**Mild**—The afflicted makes all Charisma-based checks at -2 and must succeed at a Will save to allow anyone to employ Aid Another or offer any assistance to the character (including healing). Persons attempting Bluff or Diplomacy with a character suffering paranoia do so at a -2 penalty as well.

**Moderate**—As mild, save that the penalty is -4.

**Severe**—As mild, save that the penalty is -6. The penalty extends to simple social niceties as well, gruffly refusing polite offers to buy the afflicted a drink, for instance. Furthermore, a character with paranoia always takes up the rear of a party, not wishing to have anyone at her back.

#### DESCRIPTION

A character afflicted with paranoid thoughts suspects that others have malevolent intentions, even in contravention of rational evidence. Such a character is generally experienced by others as gruff and unfriendly, affecting Charisma-based checks.

### PHOBIA, ACTIVITY/SITUATIONAL

**Type:** neurosis; **Save** DC 12/15/18 Will

#### EFFECTS

**Trigger** proximity; **Duration** 1d2 rounds *after* the character is no longer in the phobic activity/situation

#### Effect

**Mild**—The character assumes the sickened condition. In order to operate in the feared activity/situation (for instance, a claustrophobic individual crawling through a narrow tunnel), the afflicted must make a Will save each round the activity/situation requires. If the character fails the first roll she then refuses to enter the activity/situation (additional attempts are possible on subsequent rounds). However, if a save is failed after the activity/situation is entered, the afflicted assumes the terrified condition until a Will save is made, returning to the sickened condition.

**Moderate**—As mild, save that the penalty for the sickened condition is increased to -4.

**Severe**—As moderate, except that the afflicted character is unable to enter the feared activity/situation, doing whatever possible to avoid it or flee at top speed. If flight is impossible, the afflicted assumes the terrified condition until extricated by allies.

#### DESCRIPTION

A character with an activity/situational phobia has an outsized fear of an activity (examples: being alone, crossing bridges, swimming) or situation/place (caves, cemeteries, darkness, enclosed spaces, heights) which affects the ability to function when exposed and creates a powerful urge to avoid or otherwise flee the feared activity or situation.

### PHOBIA, OBJECT

**Type:** neurosis; **Severity** mild to severe; **Save** DC 12/15/18 Will

#### EFFECTS

**Trigger** proximity; **Duration** 1d2 rounds *after* the character is no longer in the presence of the phobic object

#### Effect

**Mild**—While in the presence of the phobic object, a character assumes the shaken condition and must make a Will save each round to resist the impulse to flee or otherwise avoid the object (for instance, putting others between herself and the object);

**Moderate**—As mild, save that the penalty for the shaken condition is increased to -4 and a result of 3 or less on saving throws means that instead of fleeing/avoiding, the character assumes the terrified condition until the object is no longer present or its perceived threat is eliminated.

**Severe**—As moderate, except that any saving throw below 10 results in the character assuming the terrified condition.

#### DESCRIPTION

An outsized fear of a character/class of characters (examples: ghosts/incorporeal undead, snakes/all reptiles) or things (holy symbols, mirrors) which results in impairment and a strong urge to avoid or otherwise flee the feared object.



## SCHIZOPHASIA

**Type:** psychosis; **Severity** mild to severe; **Save** DC 20/22/24 Will

### EFFECTS

**Trigger** stressor; **Duration** varies

#### Effect

*Mild*—The afflicted character speaks an uncontrollable and incoherent flood of words. Any attempted Stealth check is automatically failed. The episode lasts 2d4+2 rounds.

*Moderate*—As mild, save that the episode lasts 3d4+3 rounds.

*Severe*—As mild, save that the episode lasts 4d4+4 rounds..

### DESCRIPTION

A character afflicted with this malady speaks an uncontrollable babble of words that make no sense to any listeners as words and phrases are joined together without any logical meaning. During these episodes the afflicted is unable to communicate verbally with anyone and cannot cast spells with verbal components.

## TIC, CHRONIC MOTOR

**Type:** neurosis; **Severity** mild to severe; **Save** DC 13/16/19 Will

### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

*Mild*—The afflicted character suffers a -2 penalty on all Dexterity-based skill checks. If the tic is detected by others (DC 10 Perception check), the afflicted also suffers a -2 penalty on Charisma-based skill checks. Furthermore, an ally's Charisma-based checks are made at -1 if the afflicted character is within sight of the interaction and a known associate of the teammate attempting the check.

*Moderate*—As mild, though penalties to skill checks are -4 (-2 for an ally's checks). There is also a 20% chance of spell failure when casting spells with somatic components. The tics are also more easily noticed by others (DC 8 Perception).

*Severe*—As moderate, though penalties to skill checks are -6 (-4 for an ally's checks) and the chance of spell failure when casting spells with somatic components is 50%. The tics are noticed by others on a DC 5 Perception check.

### DESCRIPTION

Rapid, recurrent involuntary movements that are noticed by others depending on their severity. The tics are both facial (eye twitches, head jerking, mouth grimaces) and involve other bodily movements such as trembling hands. A nearly constant malady, an afflicted character may make an effort to suppress the tic, an immediate action requiring a Will save each round.

## TIC, CHRONIC VOCALIZATION

**Type:** neurosis; **Severity** mild to severe; **Save** DC 13/16/19 Will

### EFFECTS

**Trigger** —; **Duration** chronic

#### Effect

*Mild*—The afflicted character suffers a -2 penalty on all Charisma-based skill checks and Stealth checks. An ally's Charisma-based checks are made at -1 if the afflicted character is within sight of the interaction and is a known associate of the teammate attempting the check.

*Moderate*—As mild, though penalties to checks are -4 (-2 for an ally's checks). There is also a 20% chance of spell failure for spells with verbal components. This extends to the employment of magic items with verbal components (such as scrolls).

*Severe*—As moderate, though check penalties are at -6 (-4 for an ally's check). Spell failure 50% for spells with verbal components.

### DESCRIPTION

A rapid, recurrent involuntary vocalization such as throat clearing, hoots, laughing, or other nonsense noises the afflicted character has great difficulty controlling. The vocalizations occur at random intervals on a nearly constant basis, so that the attitude of others who are encountered is one step worse (for instance, normally Friendly NPCs are instead Indifferent). Chronic vocalization tics may be suppressed, an immediate action each round requiring a Will save.





## TIC, INTENTIONAL VOCALIZATION

**Type:** neurosis; **Severity** mild to severe; **Save** DC 13/16/19 Will

### EFFECTS

**Trigger** special; **Duration** 2—5 rounds after the end of the stressor

#### Effect

*Mild*—The afflicted character suffers a -2 penalty on all Charisma-based skill checks and Stealth checks, as well as voice-related Performance skills.

*Moderate*—As mild, though penalties to checks are -4. There is also a 20% chance of spell failure for spells with verbal components.

*Severe*—As moderate, though check penalties are at -6. Spell failure 50% for spells with verbal components.

### DESCRIPTION

A rapid, recurrent involuntary vocalization the character experiences when employing speech.

## Maladies for NPCs

Some forms of madness can't be easily role played and are far too disruptive to a story's narrative flow. Unless a GM wishes to build an entire adventure or campaign around them, such maladies are better suited for NPCs and can be used as interesting tools for building and twisting a plot.

## AMNESIA, GLOBAL

**Type:** psychosis; **Severity** severe; **Save** none

### EFFECTS

**Trigger** —; **Duration** permanent or until healed

#### Effect

*Mild*—Loss of memory (see below).

*Moderate*—As mild, plus -2 to all Knowledge checks.

*Severe*—As moderate, save the Knowledge check penalty is -4.

### DESCRIPTION

A character suffering from amnesia cannot remember things: name, skills, and past are all equal mysteries. She can build new memories, but any memories that existed before becoming an amnesiac are suppressed.

Worse, the amnesiac loses all class abilities, feats, and skill ranks for as long as the amnesia lasts. She retains her base attack bonus, base saving throw bonuses, combat maneuver bonus, combat maneuver defense, total experience points, and hit dice (and hit points), but everything else is gone until the amnesia is cured. If a character gains a class level while suffering from amnesia, she may use any abilities gained by that class level normally. If the class level gained was of a class the character already possessed levels in, she gains the abilities of a 1st-level character of that class, even though she is technically of a higher level in that class. If the amnesia is later cured, all the full abilities of this class are regained, including those gained from any levels taken while suffering from amnesia.

## DISSOCIATED IDENTITIES

**Type:** psychosis; **Severity** moderate to severe; **Save** DC 23/26 Will

### EFFECTS

**Trigger** special; **Duration** permanent or until healed

#### Effect

*Moderate*—The afflicted possesses 1d4+1 distinct personalities. When a stressor presents itself a Will save is necessary to prevent shifting to another identity.

*Severe*—As moderate, save that the afflicted possesses 1d6+2 distinct personalities, at least two of which are of diametrically opposed beliefs and motivations.

### DESCRIPTION

This complex condition involves the presence of multiple, separate identities within a single individual. In addition to an original, "core" personality, are a number of other distinct personalities that have evolved over time. These separate selves, including the core personality, are generally unaware of one another's existence. The identities potentially possess different ages, classes/levels, alignments, mental ability scores, and sexual orientation, but may also vary in terms of the afflicted character's perception of her own race and gender (note that the character doesn't gain racial abilities/benefits if she isn't truly a member of that race).





Note that not all of the identities need be heroic: a frightened child, brooding farmer, curmudgeonly old woman, and any other mundane personality are all possibilities. The NPC in many ways can be treated as a multiclassed character, with hit points, BAB, and the like whatever they would be if the NPC were a regular multiclassed character. However, she cannot switch between class abilities at will. Rather, the switch between personalities is often random or driven by circumstances. For instance, combat brings the cavalier half-elf to the fore, while entering a dark room brings forth the frightened child.

### PSYCHOGENIC FUGUE

**Type:** psychosis; **Severity** moderate to severe; **Save** DC 21/25 Will

#### EFFECTS

**Trigger** —; **Duration** varies

#### Effect

**Moderate**—The afflicted has no memory for her previous life, including her name, relationships, or experiences. A new identity has been assumed, alignment may have been altered (see below), and divine casters may in fact be devoted to a new deity or philosophy. Class abilities and skills are all intact. If confronted by someone or something from the past, a successful Will save indicates that the afflicted has a recollection of the thing or person, but generally dismisses this as a remembrance of a story once heard. However, 3 consecutive recollections (read: Will saves) of the past break the fugue. The flood of past memories leaves the afflicted shaken for a full 24 hours and she suffers from the effects of moderate retrograde amnesia for 2d4+3 days before memory is fully restored. This may also be healed by traditional methods. When the fugue is broken the character retains any class levels or abilities gained while afflicted with the malady.

**Severe**—As moderate, save that the afflicted has no conscious memory of past class abilities or skills. However, if a stressful circumstance presents itself where such an ability/skill would be useful, the afflicted may reflexively employ it if a Will save is made and the ability/skill would have required no prior preparation (such as memorizing a spell). Strangely, the afflicted cannot deliberately employ this same ability/skill afterwards. It's not uncommon for a creature suffering from this severe fugue to adopt a new profession entirely. This malady is permanent until healed.

#### DESCRIPTION

A person who has undergone a psychogenic fugue has lost their personal identity and assumed a new one. Most often the afflicted has set up a life far from home, with a new name, perhaps even a new alignment, though it's most common for evil persons to assume a neutral or good alignment rather than the reverse. A false past has taken the place of the afflicted's true memories. These constructed recollections are vague at best, though this foggy of distant memory is not experienced as strange by the afflicted. A psychogenic fugue is most often the result of a significant trauma.

## The Treatment of Madness

Determining how well maladies are understood in various locales in the campaign world is another GM consideration. Mental illness has a long history in our own world of poor understanding, superstitious misconceptions, and barbaric treatment methods. It stands to reason that in fantasy worlds the plight of those afflicted with madness is no better. Some cultures may believe that maladies signify possession by evil spirits, that the sufferer has somehow been touched by the gods, or the illness is somehow a sign of feeble-mindedness, low moral character, or connected to phases of the moon and lycanthropy. Asylums can range from humane refuges where only moderately effective attempts (at best) are made to assuage the symptoms of maladies, to brutal institutions where grossly ineffective and harmful "treatments" are practiced. Even worse, the mad may be exploited by evil individuals as easily manipulated followers, patsies on whom to pin blame for their own crimes, or guinea pigs for unthinkably cruel experimentation.

The text below outlines efficacious means of addressing maladies. However, these methods may not be common knowledge in all places adventurers find themselves. Indeed, discovering an effective cure for madness can itself be the subject of a grand, wide ranging quest.

### HEALERS

Characters with at least 3 ranks in Heal can employ Aid Another when afflicted individuals with neurotic conditions attempt Will saves related to their maladies. Ten ranks in Heal are necessary to do the same for those suffering from psychotic conditions. The **Faith Healing skill unlock** described in *Pathfinder Roleplaying Game Occult Adventures* allows faith healers to use their psychic powers to help a creature afflicted with maladies, employing both suspend and remove affliction abilities. Anyone with ranks in Heal may attempt to soothe a character afflicted with an active neurotic condition, though they must succeed on a check equal to the malady's Will save DC + 1/2 the afflicted's Charisma score. This is a full round action requiring 1d4 rounds, with success reducing the severity by one step (mild conditions are suppressed). The palliative effect lasts for 2d8 rounds if the condition is chronic, or until another triggering event occurs.

### AURAS AND MADNESS

Madness has an impact on some forms of the aura, as described in *Pathfinder Roleplaying Game Occult Adventures*. Sensitives (and magic devices duplicating the **Read Aura** occult skill unlock) can employ Read Health Aura to determine if a target is afflicted with maladies, and can further discern the number and general nature of these afflictions (neuroses



or psychoses, but not the specific maladies) with a second successful Perception check.

However, maladies actually disrupt and confuse the alignment aura. Employing Read Alignment Aura on an afflicted character is more difficult: each neurotic condition increases the Perception DC +2, each psychotic condition +4. If the check would have succeeded without the higher DC caused by the target's madness, roll a d4 to determine the reader's possible error: 1 = reader makes an error on both the good/evil and law/chaos axis; 2 = reader makes an error on the good/evil axis; 3 = reader makes an error on the law/chaos axis; 4 = reader correctly recognizes she has failed.

## ALCHEMY

Some alchemists have made a study of madness that enables them to concoct agents which can, for a limited time, assuage the deleterious effects of neuroses and psychoses, while less scrupulous sorts can concoct brews that mimic their effects. This involves a new discovery called *psychopharmacology*.

*Psychopharmacology*: An alchemist is able to create medicinal mixtures to temporarily alleviate the effects of neurotic and psychotic maladies. These mixtures can be purged from the system (including any negative effects) by successfully employing *neutralize poison* (DC 20 for anti-neurotic mixtures, DC 25 for anti-psychotic mixtures).

Furthermore, the study of madness has given these alchemists a +1 insight bonus when attempting a Heal check or employing Aid Another for an ally afflicted with a malady's ill effects. Non-good alchemists may also create *maddening agents*, which imbue those who ingest them with the symptoms of madness.

*\*Hallucinogenic Bomb*: When an alchemist creates a bomb he can choose to have it afflict the target with severe visual hallucinations rather than damage. Targets struck by this bomb who fail a Fortitude save (DC equal to 10+alchemist's level) experience moderate visual hallucinations (as the malady) for 2d4+2 rounds. This is a poison effect. An alchemist must have taken the psychopharmacology discovery before taking this discovery.

### BENEFICENT PHYSIC (ANTI-NEUROTIC)

Weight — Price Varies

An alchemical remedy for those afflicted with neurotic maladies, a beneficent physic provides a bonus to Will saves related to neurotic conditions that lasts for 1d4 hours before wearing off.

A *beneficent physic* has no benefit against psychotic symptoms. Those who ingest a *physic* that aren't suffering from a malady gain the benefits associated with *calm emotions*, but this lasts only 1d4+3 rounds before wearing off.

Only alchemists with the psychopharmacology discovery can brew *physics*.

### CALMING ELIXIR (ANTI-NEUROTIC)

Weight — Price Varies

An alchemical remedy for reducing the effects of neurotic maladies, a calming elixir lasts for 2d4 hours before wearing off and during this time decreases the severity of neurotic conditions by a varying number of steps. For instance, an elixir which reduces a malady one step decreases the severity from severe to moderate, from moderate to mild, and suppresses the effects of a mild condition altogether. However, these elixirs also produce a side effect of sedation, causing a -1 penalty to Initiative rolls for each step reduced (see **Table M—3**). The effects of ingesting additional elixirs while another is already in an individual's system are cumulative, but so are the side effects. If a character suffers from more than one neurosis, the elixir has its palliative effects on all the conditions accordingly.





A calming elixir has no effect on psychotic symptoms. Those who ingest an elixir that aren't suffering from a malady gain +1 to saves vs. fear per step of malady reduction, but the side effects are doubled.

Only alchemists with the psychopharmacology discovery can brew *elixirs*.

### FOCALIZING INFUSION (ANTI-PSYCHOTIC)

Weight — Price Varies

An alchemical remedy for reducing the effects of psychotic maladies, a focalizing infusion lasts for 2d4 hours before wearing off and during this time decreases the severity of the psychotic condition by a varying number of steps. For instance, an infusion that reduces a malady one step decreases the severity from severe to moderate, from moderate to mild, or suppresses the effects of a mild condition altogether. However, these infusions also produce sedation, causing a -2 penalty to Initiative rolls and Dexterity-based checks for each step reduced (see **Table M—3**). A focalizing infusion can also affect neurotic conditions (as calming elixirs), but are generally less desirable due to their more serious side effects. The effects of ingesting additional infusions while another is already in an individual's system are cumulative, but so are the side effects. If a character suffers from more than one psychosis or also suffers from neurotic conditions, the infusion has its palliative

effects on all the conditions accordingly. Only alchemists with the psychopharmacology discovery can brew infusions.

Those who ingest an *infusion* who aren't suffering from a malady gain no benefit, suffer double the side effects for the agent's duration, and are immediately incapacitated by nausea for 1d6 minutes unless they succeed on a DC 20 Fortitude save to instead be sickened. A natural 1 results in paralysis for the period of incapacitation.

### MADDENING AGENT

Weight — Price Varies

An alchemical mixture made to mimic the effects of a malady, but disguised to fool the unwary. Failure to properly deduce its effect by taste (DC 20+alchemist level Perception check) leads to the mistaken notion that it is some sort of healing potion. There are six agent varieties, each inducing the severe form of the one of the following maladies for 4d6+2 rounds: chronic motor tic, command hallucinations, formication, manic episode, retrograde amnesia, visual hallucinations. The active symptoms of the malady occur 1d4 rounds after imbibing the mixture. Those who ingest an agent who already suffer from the malady it mimics must make a DC 20 Fortitude save or enter a severe catatonic stupor (as the malady) for the agent's duration. An agent should be treated as a poison for all other purposes.

Only alchemists with the psychopharmacology discovery can brew *agents*.

**TABLE 3: PSYCHOPHARMACOLOGICAL MIXTURES**

CLASS	TYPE	EFFECT	SIDE EFFECTS	PRICE	CRAFT DC
Beneficent Physic	Onyx	Will saves for neurosis made at +1	None	150 gp	15
Beneficent Physic	Pearl	Will saves for neurosis made at +2	None	300 gp	20
Beneficent Physic	Topaz	Will saves for neurosis made at +3	None	600 gp	25
Calming Elixir	Copper	Effects of neurosis reduced one step	-1 to Initiative	200 gp	20
Calming Elixir	Silver	Effects of neurosis reduced two steps	-2 to Initiative	400 gp	25
Calming Elixir	Gold	Effects of neurosis reduced three steps	-3 to Initiative	800 gp	30
Focalizing Infusion	Copper	Effects of malady reduced one step	-2 to Initiative, Dex-based checks	400 gp	25
Focalizing Infusion	Silver	Effects of malady reduced two steps	-4 to Initiative, Dex-based checks	800 gp	30
Focalizing Infusion	Gold	Effects of malady reduced three steps	-6 to Initiative, Dex-based checks	1600 gp	35
Maddening Agent	Yellow	Chronic motor tic	None	75 gp	15
Maddening Agent	Red	Manic episode	None	150 gp	18
Maddening Agent	Green	Formication	None	300 gp	21
Maddening Agent	Clear	Retrograde amnesia	None	600 gp	24
Maddening Agent	Purple	Visual hallucinations	None	900 gp	27
Maddening Agent	Blue	Command hallucinations	None	1,200 gp	30
Tranquilizing Tincture	Onyx	Will saves for psychosis made at +1	-1 to Initiative and Reflex saves	300 gp	20
Tranquilizing Tincture	Pearl	Will saves for psychosis made at +2	-2 to Initiative and Reflex saves	600 gp	25
Tranquilizing Tincture	Topaz	Will saves for psychosis made at +3	-3 to Initiative and Reflex saves	1200 gp	30



## TRANQUILIZING TINCTURE (ANTI-PSYCHOTIC)

Weight — Price Varies

An alchemical remedy for those afflicted with psychotic maladies, a tranquilizing tincture provides a bonus to Will saves related to psychotic conditions, lasting for 1d4 hours before wearing off. Tinctures have a sedating effect, however, affecting Initiative and Reflex saves of imbibers. A tranquilizing tincture's benefits are doubled for those who only have neurotic symptoms. However, so are the side effects. Those who ingest a tincture that aren't suffering from a malady gain the benefits associated with calm emotions, but this lasts only 1d6+8 rounds before wearing off.

Only alchemists with the psychopharmacology discovery can brew *tinctures*.

## MAGIC

The following describes the effects of certain spells and spell-like abilities on maladies.

*Greater restoration*, *heal*, *limited wish*, *miracle*, or *wish*: Immediately cures a target of all the maladies from which it suffers.

*Restoration* or *remove curse* and *remove disease* cast one after another: Reduces a single moderate or severe malady by one step, but has no effect on mild maladies. The caster may target a specific malady as long as she is aware how many maladies afflict the target. *Lesser restoration* has no effect on maladies whatsoever.

*Calm emotions*: Afflicted creatures under the active employment of the spell gain a +2 bonus to saves made vs. the effects of neurotic maladies, +1 for psychotic maladies.

*Polypurpose panacea*<sup>UM</sup>: The clarity application of this spell provides a +1 bonus to saves vs. a neurotic malady's effects, but is ineffective against psychotic conditions.

*Any spell/spell-like effect causing the fascinated condition* (such as *hypnotic pattern*): The deleterious effects of neurotic conditions are suspended while an afflicted creature is fascinated, though the effects of the fascinated condition remain. When the fascinated state ends, the afflicted gains a new saving throw vs. the malady's effects unless those effects are episodic, in which case the episode is terminated.

## IOUN STONES

Crafters of wondrous items have found a means of channeling the balancing qualities of the relatively inexpensive hematite gem into an effective palliative, even a cure for maladies. Utilizing the gem's latent power to transform negative into positive energies, there are 6 varieties of these psychotropic devices. However, the magicks involved in these gems are so incredibly delicate and complex that there is a 1% chance a newly created *psychotropic ioun stone* is cursed, unbeknownst to its creator.

## PSYCHOTROPIC IOUN STONE PRICE VARIES

Slot — CL 12th Weight —

**Aura strong conjuration**

These specialized ioun stones are always crafted from pieces of a relatively low-value gem: hematite.

*Hematite ellipsoid ioun stones* shield the user from contracting maladies. When an event indicates the user would normally contract a malady, the *stone* absorbs the malady. A single stone can absorb 24 points of psychic weight. The weight of a single malady is determined by whether it's a neurosis or psychosis (neurosis = 1 point, psychosis = 3 points) and its severity (mild = 1 point, moderate = 2 points, severe = 3 points). For example, a mild neurosis has a psychic weight of 2, while a moderate psychosis has a weight of 5. Once a stone has absorbed its limit, it burns out and loses its metallic sheen, forever useless. If a stone doesn't have sufficient remaining storage to absorb a malady, it either burns out and the malady afflicts the user as it normally would (80% chance) or causes the stone to explode in a 20-foot radius (20% chance). Every creature within the blast radius must make a DC 25 Will save to avoid contracting a malady (roll +12 on **Table M—1**). Pre-existing maladies are unaffected by the *hematite ellipsoid*.

*Hematite prism ioun stones* permanently absorb existing maladies in those users already suffering from them, up to a total psychic weight of 18. Should the user have maladies that exceed the stone's remaining capacity, the result is the same as those for a *hematite ellipsoid* noted above.

Determining the remaining capacity in one of these *stones* requires detect magic and a DC 27 Spellcraft check.

## CONSTRUCTION REQUIREMENTS COST VARIES

Craft Wondrous Item, creator must be 12th level and have 5 ranks in Heal

## CURSED PSYCHOTROPIC IOUN STONE

Slot — CL 12th Weight —

**Aura strong conjuration**

These ioun stones are superficially indistinguishable from their functional counterparts: hematite ioun stones crafted to combat madness. Regardless of the type of psychotropic stone intended, all such cursed stones have the same effect. When placed in orbit around the user's head, they instead increase vulnerability to maladies and their effects. Saves to resist contracting a malady are made at a -5 penalty, and saves vs. the effects of existing maladies are made at -2. Despite these deleterious effects, the user is deluded into believing that the stone is effective and cannot be convinced otherwise, as described under Cursed Items in Pathfinder Roleplaying Game Ultimate Equipment.

## INTENDED ITEM

*Ellipsoid, Prism, Rhomboid, Sphere, Spindle, or Star Psychotropic Ioun Stone*



## DECOMPENSATION

Without treatment, maladies naturally worsen over time, a process referred to as *decompensation*. When a character contracts a malady and forgoes any treatment for a full month (treatment being defined as anything which reduces a malady by one or more steps, even temporarily), the afflicted must make a Will save for each malady suffered to determine if the condition(s) worsen by one step. If a failed save indicates that an already severe condition worsens, a new malady develops (roll on Table M—1, ignoring results of conditions already suffered).

## ADDICTION

Addiction and mental illness are frequently intertwined. The existing rules for addiction found in the *Pathfinder Roleplaying Game Gamemastery Guide* deal primarily with development of addiction and breaking free from its hold. The following are some optional additions, focusing on those who have been “cured” of an addiction, in order to add a greater degree of verisimilitude.

**Addiction Vulnerability:** When a formerly addicted individual ingests a habit-forming substance other than the original drug of abuse, a save to resist addiction to the new substance is made at -2. Furthermore, each morning the former addict must make a DC 5 Fortitude save to resist cravings for the drug to which she was once addicted. Failure results in the individual assuming the shaken condition until the drug is ingested or the character makes 3 consecutive Will saves equal to the DC of the substance of former addiction.

**Seizure Risk (Ex)** As long as persons formerly in thrall to a substance have unhealed ability damage to Intelligence, Constitution, or Wisdom, they are more vulnerable to seizures. If the person engages in any strenuous or exciting activity (for instance, combat, even if only an observer), a DC 10 Fortitude save at the beginning of the action is necessary to forestall a seizure episode: the character collapses and convulses painfully for 2d4 rounds (treat as prone and stunned). Following the seizure the character is staggered and sickened for 2d6 rounds.

TABLE 4: PSYCHOTROPIC IOUN STONES

SHAPE	EFFECT	COST
Rhomboid	Reduces a single moderate or severe neurotic malady one step or suppresses a mild neurotic malady	8,000 gp
Sphere	Provides a +1 bonus to Will saves related to all afflicting maladies	10,000 gp
Star	Reduces a single moderate or severe psychotic malady one step or suppresses a mild psychotic malady	10,000 gp
Spindle	Suppresses a single psychotic malady	18,000 gp
Ellipsoid	Prevents user from contracting maladies <sup>1</sup>	40,000 gp
Prism	Absorbs existing maladies <sup>1</sup>	40,000 gp

<sup>1</sup> See item description for details

## Suggestions for the GM

How deeply players are immersed in the game world is greatly influenced by the skill of the GM. This is doubly true for effective introduction of the elements of madness. The following are a few suggestions for creating verisimilitude.

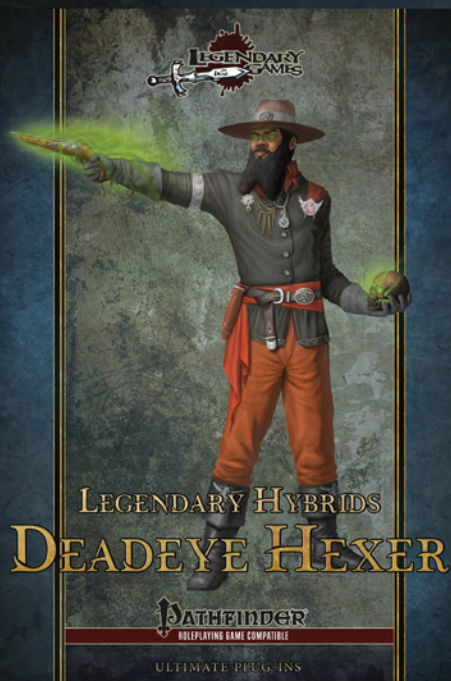
First and foremost, don't treat maladies as simple de-buffs impacting die rolls. Players are much more likely to find elements of madness challenging and immersive if the GM isn't artlessly naming a malady outright: “You have paranoid ideation.” Remember, the GM is the source of nearly all information in the game. Therefore, where madness is concerned the GM acts as the primary source of *mistaken* and *untrustworthy* information generated by maladies afflicting a character: the distortions are presented as fact. This can be accomplished with subtlety and cleverness during the course of game play. For instance, an event occurs triggering the manifestation of an afflicted character's paranoia. The GM asks for a Sense Motive check from the afflicted character, though the roll is really the PC's Will against the paranoia. If the check is failed, a note is passed to the player: *Your ally is in league with the vampires you hunt.*

Once a player begins to suspect that a character is afflicted with some form of madness, resist naming it. Keeping players in the dark about a malady's nature and mechanics mimics the confusion of an afflicted soul. If a character has hypochondriasis, ask for frequent Fortitude saves, making a notation behind your screen without comment; with mild hallucinations, ask for frequent Perception checks followed by an off-handed, “It was probably nothing.” Creating tension in a party of characters suffering from madness really can be as simple as asking for various checks and saves without apparent reason. Players are left guessing what is real or the result of madness by interspersing legitimate episodes of genuine peril mirroring the characters' maladies. For instance, allies may grow complacent about a character's repeated false alarms that are the product of

mild visual hallucinations, until they are coincidentally attacked by a shadow or some other incorporeal undead.

Familiarity with the maladies afflicting characters is essential. Consider how these afflictions could impact on the encounters ahead and plan accordingly. Madness *should* have an impact on the story being told. Finding ways to weave the manifestation of maladies into a game's events greatly enhances players' experiences.





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