

Personality Type and Color Preference: A Correlative Study in Regards to Medical Psychology
and Pharmaceuticals

Abstract

Personality type and preference towards color are present in every individual. These two seemingly differing aspects have a strong correlation in terms of use in modern medicine.

Placebo Analgesia, the idea that wellness from illness can be achieved through the psychological use of inert medicine, plays a factor in color of medication, which has been researched and proven to reduce the runtime of common illness, such as the common cold. When personality type is revealed, a specific color can be correlated with that individual personality type. This categorization of personality type was achieved through the Briggs-Myers Personality Index, an index created which gives a set of questions regarding personality and places individuals into one of sixteen possibilities. This color can be prescribed as the color of the medical capsule, resulting in a trigger in Placebo Analgesia, and aforementioned reduced runtime of illness. Data was collected from a large sample of high school students ages thirteen to eighteen and results were that near 50% of extroverts tested preferred the color light blue, and that 48% of introverts preferred the color light green. This indicates that according to past studies, most extroverts would recover from illness quicker if their prescribed medication was near light blue on the color spectrum, and the same for introverts with light green. Such recovery time would be amplified further with the use of placebos in modern medicine, however, such practice is considered unethical and pharmacies do not participate in placebo prescription today, so recovery time would be shortened around thirty-six hours on average.

Keywords: Placebo Analgesia, Briggs-Myers Personality Index, Color Theory

Personality Type and Color Preference: A Correlative Study in Regards to Medical Psychology and Pharmaceuticals

First documented in the year 1785, a specific aspect in human psychology has been researched and developed into a dangerous factor in medical psychology. The aforementioned phenomena is known as the Placebo Effect, which by definition is derived from the terms *Placebo Analgesia*, and *Nocebo Hyperalgesia*, which in turn translates to “the relationship between the body and the mind in order to improve wellness at an accelerated rate.” The Placebo Effect takes its appearance through medication, commonly with a capsule, injection, or some other sort of medical apparatus, but the backing to this ideal is the fact that regardless of whatever appearance the device may take, it must be inert, without any sort of traditional medicine or herbal remedies. The capsule must contain no medicinal value in order for the integrity of the Placebo Effect to truly take effect. This theory has been tested time and time again for centuries, and the most common trend can be seen through a research trial conducted by a research team from the University of Wisconsin department of medicine led by Dr. Bruce Barrett, where they found that the common cold, for example, runs for an average of around 14-15 days without any treatment whatsoever; a cold treated with a non-inert capsule with the patient believing it’s inert ran for an average of 8.5-9 days; and the cold treated with an inert substance with the patient believing it was non-inert ran for an average of 6.5-7 days. The blind-placebo trial had the quickest runtime of the common cold, however, it is illegal to manufacture and prescribe true placebos unless it is for a research trial, which is why traditional medications are still prescribed today. This project however would maintain modern traits of medication, whilst only altering the color of the capsule, and therefore avoiding this legal barrier.

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But while the Placebo Effect is relatively unutilized in pharmaceuticals today, there is potential to enhance this effect and provide that ideal seven-day runtime of common illnesses.

The Placebo Effect activates most effectively through trust in medication, even where no medicine is present, so this project tasked itself to find a factor that can activate and enhance the “trust factor” in human relationship with pharmaceuticals. The result of this search was the abstract entity of color. Color is an entity that, in human psychology, has more power than most other abstract ideals in terms of trust, feeling, and judgement, all qualities that must be present in a proposal regarding the ideals of the Placebo Effect. Coloring a medical capsule can cause a patient to trust the medication more than they would normally, such as if the patient prefers that color over most, but it can also cause a slew of problems if it was a color they had a predestined disdain for. For a hypothetical given patient, the color red may have connotations of anger or stress, but connotations of warmth to other patients; the color blue conjures sadness and grief for some and calmness and serenity for others. The possibilities are limitless when dealing with color, but an issue that arises is in regards to giving the wrong color to the wrong person. Assigning the wrong color would be a large possibility given that most doctors do not know their patients on a personal level, so a means of categorization was necessary. That’s where the next branch of this project arises in personality type.

The Briggs-Myers personality index, which will be explained more in-depth below and can also be found in the appendix, is a useful tool in categorizing people into one of sixteen different personality types. After a short survey, one can be put into a category of (Introvert/Extrovert)₁, (Sensing/Intuition)₂, (Thinking/Feeling)₃, and (Judging/Perceiving)₄ individually, and the result is expressed in four letters, for sixteen possibilities. For example, an

ESTP-sequenced personality type, would be an extrovert₁, or one who thrives off of attention from those around them, prefers to sense information around themselves, prefers to think through decisions rather than feel₃, and prefers to perceive society around them rather than judge₄. This personality type is often referred to as “The Entrepreneur,” which is unique of the other fifteen, so the next part in this project was to take these two ideals and synthesize them.

Finding relations and similarities between personality type and color preference will provide a general idea for which type of people prefer certain colors of medication. This correlation can be applied to pharmaceuticals in order to enhance this placebo analgesia taking place with the consumption of medication. Through the presence of trust in medication, medication has a tendency to take a stronger effect in the patient due to the Placebo Effect, and such trust can be reached through colored capsules.

Literature Review: Placebo Analgesia

As of late 2016 and early 2017, there has been no recorded scholarly research of the exact combination of Briggs-Myers personality type, individual patient color preference, and Placebo Analgesia, making it difficult to add to the conversation as a whole, so each individual aspect will be broken down separately.

First, this project deals largely with Placebo Analgesia and its effect through inert medication during common illnesses. When looking at articles such as “Placebo Effects and the Common Cold: A Randomized Controlled Trial (2011)” by Dr. Bruce Barrett and a number of other researchers at the University of Wisconsin, mentioned earlier, it is clear that different aspects and statistics are constantly being added to the idea of Placebo Analgesia itself. This article is a double-blind trial, one where both substances administered were anonymous to the

subject, that compares echinacea to placebos in relation to runtime of common cold symptoms, however this project will not focus on the use of echinacea. When given inert capsules against the subject's knowledge, the average runtime for their illness was 6.87 days, compared to the normal, untreated two-week-minimum runtime of an average cold (Barrett et al., 2011). With this knowledge, it can be seen that placebos are powerful entities with seemingly limitless potential and application, when in actuality there is a further way to activate these already powerful capsules. This article added the innovation of treating the cold with echinacea in order to reduce the runtime of symptoms, and while proving this ultimate goal, they also highlighted the more-efficient alternative being the use of Placebos. This was one of the many trials conducted in the last ten years regarding placebos to medical psychology, but it stands out due to its more dramatic results when compared to another substance being echinacea.

Other research has narrowed down the vague term "The Placebo Effect" into multiple subdivisions of the phrase. These phrases most commonly include *Placebo Analgesia* and *Nocebo Hyperalgesia*. *Placebo Analgesia* refers to the positive possibilities that the Placebo Effect can produce, such as the shortened runtime of common illness symptoms. *Nocebo Hyperalgesia*, however, refers to the opposite side of the spectrum where placebos, if administered correctly, can produce negative side effects, such as a headache or nausea. This project, however, will concern only of the Placebo Analgesia aspect. The article "The Effect of the Type and Colour of Placebo Stimuli on Placebo Effects Induced by Observational Learning" by Polish researchers Karolina Świder and Przemysław Bąbel tests the use of outside stimuli on results of taking medication. Throughout this trial, these researchers flashed different shapes and colors at the subjects during the administration of the medication, a placebo, in hopes of

activating some kind of “trust” in order to amplify the effects of the Placebo (Świder, 2016). This trust factor refers to an entity and a perception humans have towards the strength of medication, typically positive, that allows the Placebo Effect to take full effect. They also ran a trial in this article in which they would administer “electric shocks delivered by the Constant Current High Voltage Stimulator to the inner side of the non-dominant forearm through two durable stainless steel disk-electrodes that were eight mm in diameter and spaced thirty mm apart,” but this aspect of their research bared minimal results (Babel, 2016). To the surprise of many scholars and researchers keeping up with this trial, neither stimulus had any effect in the runtime of the patients’ sickness compared to the traditional Placebo Effect. While the typical effects of a placebo took place, no additional recovery time from illness was noticeably shaved off. The patients still averaged around a week-long recovery time, but this is solely from the effects of the placebo individually. There seemed to be some ground to the whole experiment however in regards to pain tolerance with their different stimuli, however this has little-to-no relation to this project, as well as not including personality type.

Literature Review: Briggs-Myers Personality Index

Next, we have the aspect of personality type research present in this project. There has been countless psychology-based research around personality type, but through research of relevance to color preference, correlations were never found through specific personality types, they were left in generalization, such as the Lüscher Color Test, where aspects of personality would be hinted at, but never firmly stated as definite. One of the goals of this project was to find a concrete way to categorize people on a psychological level without knowing the person on a personal level, in order to reliably prescribe a color for their personal medication. Through

research of the topic of color, it has been used in terms of personality, like the Lüscher Color Test mentioned above, but not to a definite extent, and therefore not much of a help to this project.

One of, if not the most influential sources in this project is the research from psychologist duo Katherine Briggs and Isabel Briggs-Myers and their development of the Briggs-Myers Personality Index. This index was a series of four questions in regards to decision making, environmental preference, and personality as a whole, and places individuals into one of sixteen categories represented by a four letter sequence. For example, a personality type possibility can be referred to as “The Entrepreneur” with a sequence of ESTP, and is unique to the other fifteen possibilities. The sixteen total possibilities are as follows: “The Healer” (INFP), “The Counselor” (INFJ), “The Teacher” (ENFJ), “The Champion” (ENFP), “The Mastermind” (INTJ), “The Commander” (ENTJ), “The Visionary” (ENTP), “The Architect” (INTP), “The Provider” (ESFJ), “The Performer” (ESFP), “The Protector” (ISFJ), “The Composer” (ISFP), “The Supervisor” (ESTJ), “The Entrepreneur” (ESTP), “The Inspector” (ISTJ), and “The Craftsman” (ISTP). Throughout the research of this index, there has been no correlation to color preference directly, which is ultimately what this project adds to the conversation. As this project will go to prove, an individual’s favorite color, or the color they feel safest with, is not entirely due to free will as many believe, but instead due moreso to individual personality patterns in correlation with color preference, expressed by the given survey.

Literature Review: Color studies

The last aspect for this project overall is the appearance and psychological connections to color. Color plays a key role in this project as it is what directly activates the Placebo Effect in

the patient's occipital lobe as researched in the article "The Effect of the Type and Colour of Placebo Stimuli on Placebo Effects Induced by Observational Learning" by Turkish researchers Przemyslaw Babel and Karolina Swider. A common misconception in today's view on color psychology is the accuracy and legitimacy of the Lüscher Color Test. The Lüscher Color test is a short series where the subject goes through a series of different colors and chooses them in any order they please. They are then given the test again and asked to choose the colors in an order that makes them feel best, in order to test for accuracy. After taking this test, results are given in a list, with each category labeled as follows: "Your existing situation," "Your stress source," "Your restrained characteristics," "Your desired objective" and "Your actual problem" (Lüscher, 1984). While intriguing, these results do not ultimately indicate favorite color or personality type, making it ineffective to this particular goal of this project.

A key article in the psychological properties of colors was the UK color psychology website "Colour Affects." Colour Affects is a company that specializes in the branding aspect and emotional connection of color, and has worked with corporations such as Shell and Motorola. On this site is a number of abstract nouns, both positive and negative, in regards to different colors on the simple rainbow, as well as black, white, brown and pink. For example, they had the color blue, with positive abstract nouns such as "calmness" and "serenity" as well as negative adjectives such as "coldness" and "sadness" (Wright, 2016). This entire basis of color having different connotations to different people is what this project is reliant upon. While Person A may view blue as sad, Person B may view it as calming. This decision is determined through personality type, which is categorized by the Briggs-Myers Personality index. This creates a goal of this project, which would be to decipher which personality types sway towards

certain colors, avoiding negative connotations in each individual. Outside sources that have been researched for this project provide insight to each fragment of this overall project, but fail to collectively look into the potential for the combination of the Placebo Effect, personality type and the color theory. This project would add an original idea into the conversation of medical psychology. It would add a new way to amplify the nature of the Placebo Effect in modern medicine.

Hypothesis

Before the initial action research of this project, a hypothesis was formulated regarding the correlation between individual color preference and individual personality type categorization from the Briggs-Myers index. It was hypothesized that among the students given the survey, a dominant color would be expressed for each of the sixteen personality types and unique only to that individual sequence with minimal overlap.

Methods

In relation to this study and ultimate goal of easily identifying individual color preference, three separate trials were conducted throughout the year. Moreso of a “wild card” trial, the entity of fear was tested among fifteen individuals. They were shown different, colored pictures of different creatures and people, typically found in different phobias, and asked to choose which one they were more scared of, as well as state their favorite color. Hopes of this trial were that through different fears in the individuals tested a dominant color would be expressed as a preference in correlation to the fear response; data was inconclusive seeing that most people tended to be most fearful of the same entities, being the clown and the spider.

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Next a similar trial was conducted with fifteen new subjects, this time in regards to music. The subjects were asked their favorite type of music alongside their favorite color, and once again, data was inconclusive. Color and music preference showed no correlation whatsoever and this idea was abandoned.

Finally, a successful trial was conducted in regards to the Briggs-Myers Personality Index and color preference. Throughout this project, 310 high school students were randomly and anonymously surveyed. These students ranged from ages fourteen to eighteen and attended roughly five different high schools, three of which were in close proximity to one another in Southern California, with the other two in Nevada and Texas. These students willingly participated in an online survey in which they were asked a number of questions regarding personality type, yet remaining unknown to the subjects in order to maintain integrity in answers. Questions were designed based upon the four sections of the Briggs-Myers Personality Index (B-M Index) , but reworded in a way to where they were easier to answer, kept a level of anonymity, and still provided meaningful responses. The B-M Index itself is four parts as mentioned, and each subsection has potential to branch off into one of two paths, resulting in sixteen potential personalities, so in order to design the questions to receive a definite personality type in each subject, three questions were administered for each subsection, resulting in twelve total questions across the four areas. In this particular survey however, Extroversion vs. Introversion was the primary focus, so in order to make data collection and analysis easier, Options A in the survey were based upon the typical responses an extrovert would give, and the same for Options B and introverts. By having three questions per section administered, no matter what combination of answers were given, answers would result in a two-thirds sway

toward either Option A or B, providing reliable categorization of each individual subject. Along with finding personality in each participant, they were asked to give their favorite color, prefaced with a simple adjective. The simple adjective includes those such as “light” or “dark” when dealing with color and became significant in some more radical color shades such as green and blue. This data was then recorded by stating the individual’s personality type, followed by their color choice, for example: “(ESTP) - Blue (Light)”. This format of recording provided for easier categorization and data analysis.

Limitations

Limitations to this project were small, yet somewhat significant regarding the age range of survey participants. The personality survey was administered to high school students ages 14-18, and strictly in that age range. Due to issues with the Institutional Review Board and privacy issues regarding the survey itself, this survey was not sent out to adults over the age of eighteen. This is regarded as somewhat significant because personality is widely considered among researchers to stop ultimate development around age thirty (Rajagopal, 2003). This means that personality among teenagers, like the 310 tested in this project, has potential to change before age thirty. If given the opportunity, adults over this age range would have been simultaneously surveyed with the high school students. Even though this limitation may seem significant, it does not undermine the conclusions of this project due to the fact that the data collected expresses the specific color preference among Briggs-Myers personality types, and even if these personality types shift over time, the data correlation remains constant.

Another minor limitation to this project is the differing definitions of specific color shades among individuals. For example, a subject’s preferred shade of “light blue” may differ

from another subject's perception or preferred shade. This possible discrepancy had potential to be avoided with the use of Pantone distinction between colors, however when a focus group of ten were personally asked the question "do you know what Pantone colors are?" only one participant responded with yes while the other nine had no knowledge of this system, so this idea was scrapped from the end survey.

Results

Among the subjects surveyed, precisely two-hundred responded as extroverts while one-hundred and ten responded more on the introvert side of the spectrum. Extroversion was likely the dominant personality type due to the widely positive reputations and encouragement for participation among the schools surveyed. When analyzing the extroversion data, an obvious frontrunner color was expressed as a preference in light blue. Color names such as "Sky Blue" and "Teal" were all grouped together based upon their closest shade, in this case, light blue. Ninety-five students responded that light blue was their favorite color, marginalizing for a 47.5% expression, with the next closest color being dark blue, marginalizing for 11.5% or twenty-three participants. The rest of the data found that seven students (3.5%) chose hot pink, eighteen students (9%) chose light pink variations, five students (2.5%) chose dark green variations, three students (1.5%) chose light green variations, fourteen students (7%) chose red variations, twenty-two students (11%) chose purple variations, four students (2%) chose yellow variations, four students (2%) chose black, and five students (2.5%) cumulatively chose colors tan, orange, brown, and white.

One-hundred and ten introverts were tested simultaneously and the dominant frontrunner in this group was light green and related colors such as "emerald" and "mint," totalling 46.3%.

The next closest in this data set was again dark blue, totalling 14%, and the rest of this set found that six students chose light blue (5.5%), three students chose light pink, hot pink and dark green (2.7% total), eleven students chose red variations (10%), nine students chose purple variations (8.2%), two students chose orange variations (1.8%), four students chose yellow variations (3.6%), one student chose brown (.9%), five students chose black (4.5%), and two students chose grey (1.8%). (Data sets and graphs are provided in the appendix section of this paper)

Discussion

Practical application of this apparent correlation between individual personality type and color preference is most effective in pharmaceuticals. This is where the final aspect of this entire project, The Placebo Effect, is introduced and used to put this color/personality correlation into practical use. Placebo Analgesia is defined as the relationship between the body and the mind in order to achieve wellness through the use of an inert substance, which in turn means that no actual medication has to be given for a patient to recover from symptoms of illness, as long as they have trust in the medication that they are taking. The “trust factor” is always a goal for researchers on the Placebo Effect, because it is ultimately what amplifies a placebo’s strength. For example, researchers in the past have found that there are varying levels of what humans consider medicinal strength, such as how most people view a syringe as a stronger form of medicine than a capsule, when in actuality this is not always true. It’s human nature to have these perceptions of medication, which is going to aid the correlation of color and personality in the long run. In the article “The Effect of the Type and Colour of Placebo Stimuli on Placebo Effects Induced by Observational Learning”, by Dr. Przemysław Bąbel and Dr. Karolina Świder, ran a research trial in Poland where they introduced colored stimulus to patients taking a

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Placebo. What they found was there were very little results from this trial, mostly because the patients understood that they were not taking actual medicine, defeating the purpose of a Placebo. Even through this mistake however, they noticed a marginalized average runtime of illness in their subjects, when all they truly did was introduce a color to their patients during administration. They almost accidentally found an efficient way to amplify the “trust factor” in a placebo through color.

This is where not only a hypothesis occurred, but reliable categorization of individual patients became a necessity to this project. It was hypothesized in this project that by using the Briggs-Myers Personality Index, people in general could be categorized based off of a subconscious trait, personality, and that each of these sixteen different possible types of personality would have their own unique color that they felt safest with with minimal overlap. The overall concept of this hypothesis addressed correct entities of the results, however it proved to be too specific compared to the data found. As the data shows, extroversion and introversion were the only two subsections that provided true data in terms of correlation.

By grouping all of these findings together, it can be concluded that by pharmacies color-customizing medication to suit their individual patients, they could actually aid in the shortened runtime of symptoms from illness by days. For instance, a pharmacist would get a section from the doctor’s office saying that Patient A is an extrovert, so the pharmacist would make the color of that person’s medication light blue, rather than the random color choice used today. Same goes for introverts and light green. Pharmacies today use color of capsules for organization purposes, however this method could actually be detrimental. For example, roughly 95.5% of extroverts would not respond well to a capsule being the color brown, and could

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actually maintain more hours of illness symptoms. This relates back to the idea of medicinal conception, simply because brown is not normally a color associated with medicine, so it automatically receives negative connotations from patients.

Applying this idea to modern pharmaceuticals would require a couple of events to occur. First, a doctor's office must have clearance to administer an introversion vs. extroversion survey in order to find personality type, however this would unlikely be an issue due to the already large number of seemingly irrelevant questions given in most doctor's offices. If someone were to go into a doctor's office with a fever; despite their illness, typical questions asked include "Do you wear a seatbelt in the car" or "Do you keep guns in your house?" and while not invalid questions due to the nature of health, they only further the possibility of a personality survey being administered (Nelson 2015). The Briggs-Myers Personality Index has potential to be administered in doctor's offices, and in turn medication can be color-customized in order further activate Placebo Analgesia, which in turn alleviates symptoms of common illnesses.

Future applications of this correlation can also be potentially recycled in the clinical research field. The correlation between one's personality type and their color preference is something with potential to be tested further in a clinical setting, in a possible double-blind trial regarding the color of the medical capsule. A double-blind trial, similar to the one conducted in Dr. Barrett's article "Placebo Effects and the Common Cold: A Randomized Controlled Trial", mentioned earlier, in which one control group would be given a medication of its own traditional color, while another group would be given a capsule matching the color of their personality, in order to see a true cross-comparison. This potential trial would further push the conclusions set

by this project, and also go to prove the findings of Dr. Babel and Dr. Świder in their placebo-based trial.

Conclusion

In regards to grouping human personality, the Briggs-Myers Personality Index allows for categorization of individuals into sixteen categories. Once categorized, it is concluded that in the first section of the index (Introversion vs. Extroversion), Introverts preferred colors closest to Light Green, while Extroverts preferred colors closest to Light Blue. This correlation opens possibilities for use in pharmaceuticals, mainly due to the ideal of Placebo Analgesia. When using this correlation based upon the patient's individual personality type and color preference, Placebo Analgesia can be used to shorten the runtime of common illness symptoms by three to four days. A Polish research team proved that healing times in the common cold have been shown to reduce when a colored stimulus is administered. Therefore, when a doctor or pharmacist knows the patient's personality type, the color they prefer can be inferred, and in turn their medicine can be color-customized, allowing for ethical application of the Placebo Effect, and in turn more rapid healing time in the patient's symptoms.

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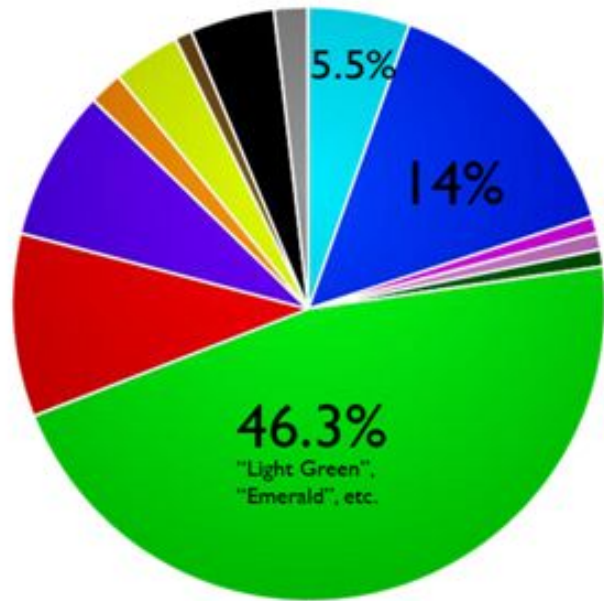
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Appendix

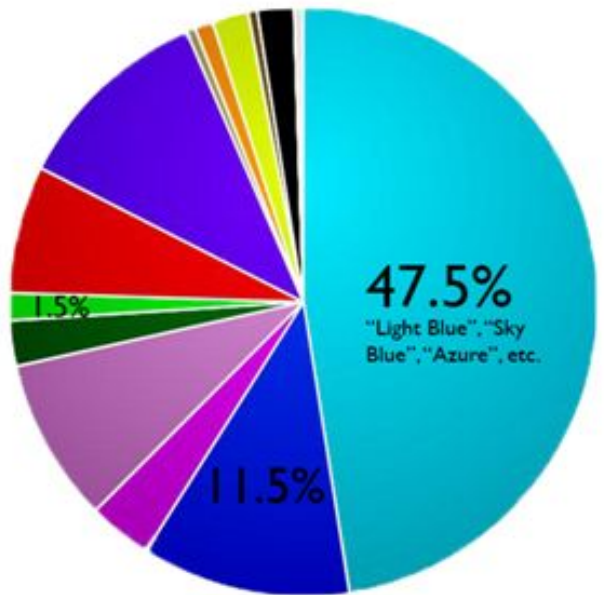
INTROVERSION: 110

- (L)Blue: 6 (5.5%)
- (D)Blue: 16 (14%)
- (H)Pink: 1 (.9%)
- (L)Pink: 1 (.9%)
- (D)Green: 1 (.9%)
- (L)Green: 51 (46.3%)**
- (S)Red: 11 (10%)
- (S)Purple: 9 (8.2%)
- (S)Tan: 0 (0%)
- (S)Orange: 2 (1.8%)
- (S)Yellow: 4 (3.6%)
- (S)Brown: 1 (.9%)
- (S)Black: 5 (4.5%)
- (S)Grey: 2 (1.8%)
- (S)White: 0 (0%)



**DATA: 310 TOTAL
EXTROVERSION: 200**

- (L)Blue: 95 (47.5%)**
- (D)Blue: 23 (11.5%)
- (H)Pink: 7 (3.5%)
- (L)Pink: 18 (9%)
- (D)Green: 5 (2.5%)
- (L)Green: 3 (1.5%)
- (S)Red: 14 (7%)
- (S)Purple: 22 (11%)
- (S)Tan: 1 (.5%)
- (S)Orange: 2 (1%)
- (S)Yellow: 4 (2%)
- (S)Brown: 1 (.5%)
- (S)Black: 4 (2%)
- (S)Grey: 0 (0%)
- (S)White: 1 (.5%)



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The following questions were given in the survey regarding extroversion versus introversion:

-Which of the following words would best describe you?

A) Outgoing, talkative

B) Private, Reserved

-When given a project, which way do you prefer to execute it?

A) With a group of colleagues

B) Alone or with a close friend

-If you were presented with an opportunity to be the center of attention, how would you react?

A) Embrace the idea with excitement

B) Feel nervous and deny the

opportunity

-In the questions given, Option A represents an extrovert-based answer, while Option B represents an introvert-based answer

-An odd number of questions were given, forcing participants to express either a 2/3 response towards option A or B, allowing for easier categorization

What's Your Personality Type?

Use the questions on the outside of the chart to determine the four letters of your Myers-Briggs type. For each pair of letters, choose the side that seems most natural to you, even if you don't agree with every description.

1. Are you outwardly or inwardly focused? If you:

- Could be described as talkative, outgoing
- Like to be in a fast-paced environment
- Tend to work out ideas with others, think out loud
- Enjoy being the center of attention

then you prefer **E**
Extraversion

2. How do you prefer to take in information? If you:

- Focus on the reality of how things are
- Pay attention to concrete facts and details
- Prefer ideas that have practical applications
- Like to describe things in a specific, literal way

then you prefer **S**
Sensing

3. How do you prefer to make decisions? If you:

- Make decisions in an impersonal way, using logical reasoning
- Value justice, fairness
- Enjoy finding the flaw in an argument
- Could be described as reasonable, level-headed

then you prefer **T**
Thinking

4. How do you prefer to live your outer life? If you:

- Prefer to have matters settled
- Think rules and deadlines should be respected
- Prefer to have detailed, step-by-step instructions
- Make plans, want to know what you're getting into

then you prefer **J**
Judging

5. How do you prefer to live your outer life? If you:

- Prefer to leave your options open
- See rules and deadlines as flexible
- Like to improvise and make things up as you go
- Are spontaneous, enjoy surprises and new situations

then you prefer **P**
Perceiving

ISTJ Responsible, serious, analytical, reserved, realistic, systematic. Prefers to be in a fast-paced environment.	ISFJ Warm, considerate, gentle, responsible, organized. Through financial calculation often doing things helpful to others.	INFJ Idealistic, organized, insightful, discernible, unassuming, gentle, but firm and independent. Under intellectual stimulation.	INTJ Innovative, independent, strategic, logical, reserved, insightful. Does not let one's original ideas be influenced by others.
ISTP Action-oriented, logical, analytical, spontaneous, reserved, independent. Enjoys education, skilled at understanding how mechanical things work.	ISFP Gentle, sensitive, flexible, realistic. Inclined to create a personal environment that is both beautiful and peaceful.	INFP Gentle, sensitive, idealistic, perceptive, caring, loyal. Ideal view of harmony and personal growth. Does not desire real possibilities.	INTP Intellectual, logical, precise, reserved, flexible, imaginative. Original thinker who enjoys speculation and creative problem solving.
ESTP Outgoing, realistic, action-oriented, curious, realistic, spontaneous. Thinks in terms of what is, rather than what could be.	ESFP Playful, enthusiastic, flexible, spontaneous, social. Enjoys being the center of attention, often helping people to complete tasks.	ENFP Enthusiastic, creative, spontaneous, curious, respectful, idealistic. Likes to inspire, enjoys meeting new people, and is particularly helpful in emotional affairs.	ENTP Inventive, enthusiastic, strategic, imaginative, humorous, flexible. Enjoys new ideas and challenges, often impulsive.
ESTJ Efficient, outgoing, practical, systematic, responsible, realistic. Like to see the done and get things done in an orderly fashion.	ESFJ Friendly, sociable, organized, systematic, practical. Like to be helpful and whose efforts often bring others productive.	ENFJ Caring, enthusiastic, idealistic, organized, systematic, responsible. Like to communicate with others and establish connections with people.	ENTJ Strategic, logical, efficient, outgoing, practical, independent. Effective organizers of people and long-range planners.

*Briggs-Myers Personality Index