



FACTITIOUS DISORDER

Hemavathy V and Pechimayum Ranjita*

Sree Balaji College of Nursing, Bharath Institute of Higher Education and Research, Bharath University, India

ARTICLE INFO

Article History:

Received 20th October, 2017

Received in revised form 29th

November, 2017

Accepted 30th December, 2017

Published online 28th January, 2018

ABSTRACT

Factitious disorder is a serious mental disorder in which someone deceives others by appearing sick, by purposely getting sick or by self-injury. Factitious disorder also can happen when family members or caregivers falsely present others, such as children, as being ill, injured or impaired. Factitious disorder symptoms can range from mild (slight exaggeration of symptoms) to severe (previously called Munchausen syndrome). The person may make up symptoms or even tamper with medical tests to convince others that treatment, such as high-risk surgery, is needed. Factitious disorder is not the same as inventing medical problems for practical benefit, such as getting out of work or winning a lawsuit. Although people with factitious disorder know they are causing their symptoms or illnesses, they may not understand the reasons for their behaviours or recognize themselves as having a problem. Factitious disorder is challenging to identify and hard to treat. However, medical and psychiatric help are critical for preventing serious injury and even death caused by the self-harm typical of this disorder.

Copyright©2018 Hemavathy V and Pechimayum Ranjita. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Definition

A factitious disorder is a condition in which a person, without a malingering motive, acts as if they have an illness by deliberately producing, feigning, or exaggerating symptoms, purely to attain a patient's role.

Types

The DSM-5 differentiates among two types:

- Factitious disorder imposed on self (Munchausen syndrome)
- Factitious disorder imposed on another (Munchausen syndrome by proxy)

Causes

The cause of factitious disorder is unknown. However, the disorder may be caused by a combination of psychological factors and stressful life experiences.

Risk Factors

- Childhood trauma, such as emotional, physical or sexual abuse
- Loss of a loved one through death, illness or abandonment

- Past experiences during a time of sickness and the attention it brought
- Personality disorders
- Depression
- Desire to be associated with doctors or medical center

Sign and Symptoms

- Exaggerating existing symptoms
- Making up histories-a false medical history, such as claiming to have had cancer or AIDS.
- Faking symptoms. They may fake symptoms, such as stomach pain, seizures or passing out.
- Causing self-harm. They may make themselves sick, for example, by injecting themselves with bacteria, milk, gasoline and cut or burn themselves. They may take medications, such as blood thinners or drugs for diabetes, to mimic diseases.
- Tampering.

Diagnosis

Diagnosis of factitious disorder is usually based on a combination of laboratory findings and the gradual exclusion of other possible diagnoses. In the case of MSBP, the abuse is often discovered through covert video surveillance.

The most important differential diagnoses, when factitious disorder is suspected, are malingering, conversion disorders, or another genuine psychiatric disorder.

**Corresponding author: Hemavathy V*

Sree Balaji College of Nursing, Bharath Institute of Higher Education and Research, Bharath University, India

Treatment

- Having a primary care doctor. Using one doctor or gatekeeper to oversee medical care can help manage needed care and the treatment plan.
- Psychotherapy. Talk therapy (psychotherapy) and behavior therapy may help control stress and develop coping skills.
- Medication. Medications may be used to treat additional mental health disorders, such as depression or anxiety.
- Hospitalization. In severe cases, a temporary stay in a psychiatric hospital may be necessary for safety and treatment.
- Family therapy

Complication

- Injury or death from self-inflicted medical conditions
- Severe health problems from infections or unnecessary surgery or other procedures
- Loss of organs or limbs from unnecessary surgery
- Alcohol or other substance abuse
- Significant problems in daily life, relationships and work

Prognosis

The prognosis of factitious disorder varies by subcategory. Males diagnosed with the psychological subtype of FD are generally considered to have the worst prognosis. Self-mutilation and suicide attempts are common in these individuals. The prognosis for Munchausen's syndrome is also poor; the statistics for recurrent episodes and successful suicides range between 30% and 70%. These individuals do not usually respond to psychotherapy. The prognosis for non-chronic FD in women is variable; some of these patients accept treatment and do quite well. This subcategory of FD, however, often resolves itself after the patient turns 40. MSBP involves considerable risks for the child; 9–10% of these cases end in the child's death.

Reference

- American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 4th edition, text revised. Washington, DC: American Psychiatric Association, 2000.
- Eisendrath, Stuart J., MD. "Psychiatric Disorders." In Current Medical Diagnosis & Treatment 2000, edited by Lawrence M. Tierney, Jr., MD, and others. Stamford, CT: Appleton and Lange, 2000.
- "Psychiatry in Medicine," Section 15, Chapter 185 in The Merck Manual of Diagnosis and Therapy, edited by Mark H. Beers, MD, and Robert Berkow, MD. Whitehouse Station, NJ: Merck Research Laboratories, 2000.
- Feldman, Marc D.; Charles V. Ford; Toni Reinhold (1993). Patient or Pretender: Inside the Strange World of Factitious Disorders. *John Wiley & Sons Inc.* ISBN 0-471-58080-5.
- Feldman, Marc D. (editor) (August 1996). Eisendrath, Stuart J., ed. The Spectrum of Factitious Disorders (Clinical Practice, 40). *American Psychiatric Publishing; 1st ed edition.* p. 229. ISBN 0-88048-909-X

How to cite this article:

Hemavathy V and Pechimayum Ranjita (2018) 'Factitious Disorder', *International Journal of Current Advanced Research*, 07(1), pp. 8740-8741. DOI: <http://dx.doi.org/10.24327/ijcar.2018.8741.1419>
