Persistent Delusional Disorder Presenting as Munchausen by Proxy - A Case Report

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ABSTRACT

Delusion is a false, unshakable belief that is out of keeping with the patient's social and cultural background (Patricia Casey et al, 2019). Persistent delusional disorder (PDD) is characterized by the development either of a single delusion or of a set of related delusions which are usually persistent and sometimes lifelong. Often they are persecutory, hypochondriacal, or grandiose, but they may be concerned with litigation or jealously, or express a conviction that the individual's body is misshapen, or that others think that he or she smells or is homosexual (ICD-10 classification of Mental and Behavioural Disorders). Delusional disorder with delusions of infidelity has been called conjugal paranoia or Othello syndrome (Sadock & Sadock, 2015). Munchausen syndrome was first termed by Asher in 1951. Munchausen syndrome by proxy, essentially, is a form of child abuse in which a parent, usually the mother, or a caregiver repeatedly fabricates or actually inflicts injury or illness in a child for whom medical intervention is then sought, often in an emergency setting (Sadock & Sadock, 2015). This case report presents one such beautiful case, where a father with persistent delusional disorder repeatedly fabricates an illness in his daughter, and make multiple requests to

medicate his daughter. The core component of the delusional belief was infidelity. Initially, it was difficult to find any psychopathology in the daughter, except for some maladaptive reaction formation to frequent altercations with the father. Subsequently, it was realized that the father had persistent delusional belief related to his daughter's fidelity (which was not corroborated by the daughter or other relatives). Personality can play a role in the genesis of delusional states; abnormally suspicious personalities can react to deepening difficulties with ideas of persecution, or may slowly develop delusions of marital infidelity or bodily ill health. One basic difference between Schizophrenia and PDD, is that delusions in PDD are well systematized, with one basic delusion and remainder of the system being logically built on this error (Patricia Casey et al, 2019). Persistent delusional disorders lack other psychopathology like hallucinations seen in Schizophrenia.

Keywords: Persistent Delusional Disorder, Munchausen by Proxy, Infidelity, Paranoia

CASE REPORT

A 28 year old girl, studied upto graduation was brought to Psychiatry OPD by her father with complaints of disturbed sleep, poor appetite and anger outbursts for past 6 months. The father reported that the girl had some disturbing and inappropriate behavior for past 6 months. She would try to go out and talk to strangers for no valid reasons. On some occasions the girl had asked her father to give more freedom. There was an occasion, when she wore sindoor (a religious ornament which women in the country wear on forehead after marriage, to respect their husband) after verbal altercations with her father. The girl was stopped from attending any classes and she discontinued her studies. The reason for this was that the father believed that his opponents may try to get her married with someone who might not be good. On occasion, the father would talk about her indecency and increased sexual drives. One of the patient's (girl's) sister was similarly stopped from continuing studies and labeled as suffering from mental illness by the father. The girl was admitted on father's requests. The week long evaluations did not reveal any psychopathology in her. Her ward behavior was noted to be socially appropriate and no attempts to run away from the ward or requests to discharge were made by her. Her sleep and appetite were fair and she did not complain of any physical or mental illness. The complaints of the father were cross-checked with patient's sister and mother, who denied any history of sexual advancement, wandering behavior or any socially inappropriate behavior in the girl. The father appeared to be anxious all the time and insisted to prolong her stay in the hospital. There were repeated requests by the father to sedate the girl or give her psychiatric medicines and was annoved with the treatment protocol as no psychiatric medicines were started except to augment her sleep. On many occasions there were complaints by the father, that she can easily be allured by his opponents into marriage to a low profile guy. He remained suspicious about his daughter all the time with restrictions on her phone usage. She was asked not to talk to any of the family members, including female members of the family, due to the

fear that they will provoke her for marriage with someone. The father had some grandiose ideas of richness and political contacts which was rubbished by his daughters. Based on the detailed work up and serial interviews with entire family members a diagnosis of Persistent Delusional Disorder with Munchausen by Proxy was made in the father. He was detailed with the reality and requested to start taking treatment for the same.

CONCLUSION

Munchausen by proxy is a rare phenomenon in clinical practice. When present the secondary gain behind such presentations must be explored. Infidelity is a common core component in PDD. Personality traits can be a precursor for suspiciousness which can develop into delusion at the time of stress.

Declaration by Authors

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REFERENCES

- Glaser D. Fabricated or induced illness: From "Munchausen by proxy" to child and family-oriented action. *Child Abuse Negl* 2020; 108: 104649. [PubMed] [Google Scholar]
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th edn). American Psychiatric Publishing, Washington DC and London, England. [Google Scholar]
- Weber B, Gokarakonda SB, Doyle MQ. Munchausen Syndrome. 2021; 31. In: *StatPearls [Internet]*. Treasure Island (FL): StatPearls Publishing; 2021. [accessed Oct 27, 2021] Available from https://pubmed.ncbi.nlm.nih.gov/3 0085541. [PubMed] [Google Scholar]

 Nayantara Rao Gandra, S. Narasimha Rao, Srivarshini. "Recurrent Haemetemesis: the Mystery Unfolds". Journal of Evolution of Medical and Dental Sciences 2014; Vol. 3, Issue 61, November 13; Page: 13613-13616, DOI: 10.14260/jemds/2014/3816

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