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## Munchausen syndrome

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### Summary

- Munchausen syndrome is a mental disorder in which the patient fakes illness to gain attention and sympathy.
  - This can result in doctors providing unnecessary treatment, including surgery.
  - Munchausen syndrome is difficult to diagnose because many other conditions need to be ruled out first.
  - It is also hard to diagnose because people with the condition tend to see many different doctors, so their pattern of behaviour is hard to detect.
  - Treatment aims to manage rather than cure the condition, and is rarely successful.
  - Munchausen syndrome by proxy (MBP) is the old term for a form of abuse where a person either fakes or produces symptoms in someone else, usually their child. This is now called 'fabricated or induced illness by carers' (FIIC) and is different to Munchausen syndrome.
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Munchausen syndrome (also known as factitious disorder) is a rare type of mental disorder in which a person fakes illness. The person may lie about symptoms, make themselves appear sick, or make themselves purposely unwell. This type of mental disorder is most often seen in young adults and is considered a type of self-harm.

A person with Munchausen syndrome can be very convincing, which can result in doctors providing unnecessary treatment, such as medication or surgery.

A person with Munchausen syndrome doesn't pretend to be ill for personal gain, such as prescription medications or money. Instead, the person is driven to behave the way they do for complex psychological reasons, including a strong desire for attention and sympathy.

Often people with Munchausen syndrome have experienced childhood trauma.

### Symptoms of Munchausen syndrome

A person with Munchausen syndrome gains intense satisfaction from the attention associated with playing the ill patient or victim. Signs and symptoms that may suggest Munchausen syndrome include:

- a spectacular medical history that includes a large number of tests, medical procedures and operations
- an odd collection of seemingly unrelated symptoms
- a lack of conclusive results despite intense medical investigations
- new symptoms that appear after medical tests prove negative
- extensive medical knowledge of many different illnesses
- frequenting many different doctors, sometimes in other states or territories
- frequent presentation at emergency departments, usually at different hospitals
- requests for invasive medical procedures or surgeries
- failure to improve despite medical treatment, including relapsing for unknown reasons.

### Common presentations of Munchausen syndrome

A person with Munchausen syndrome may convince doctors in many ways. For example, they may:

- pretend to be in pain
  - exaggerate symptoms
  - fake symptoms, including psychological symptoms
  - poison themselves with chemicals
  - infect themselves with unclean substances
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- tamper with diagnostic tests – for example, contaminate a urine sample with sugar or blood
- interfere with a medical condition so that recovery isn't possible – for example, repeatedly open or contaminate a skin wound or not take prescribed medication
- ignore a genuine medical problem until it becomes serious.

### **Common complications of Munchausen syndrome**

A person with Munchausen syndrome is at risk of many complications including:

- side effects from prescription medicines, including overdose
- complications from poisoning or self-harm practices
- complications from medical procedures or surgeries
- death from self-harm or complications of medical intervention.

### **Risk factors for Munchausen syndrome**

Some people may have a higher risk of developing Munchausen syndrome than others. Risk factors may include:

- chronic illness during childhood – the person may have received a lot of attention because of their illness
- chronic illness of a significant family member when the person was a child
- self-esteem or identity problems
- relationship problems
- difficulty distinguishing reality from fantasy
- ability to lie and manipulate
- a history of mental problems such as depression, hallucinations or post-traumatic stress disorder (PTSD)
- the need to blame personal failures on external factors, such as illness.

### **Diagnosis of Munchausen syndrome**

Diagnosis is difficult because a range of legitimate physical and mental illnesses must be ruled out first. To complicate matters further, a person with Munchausen syndrome tends to seek help from various health care providers to avoid 'tipping off' any one doctor. Diagnosis, if it happens at all, may depend on abstract concepts such as:

- The person's symptoms don't make sense when compared with the test results.
- The person is unusually eager to undergo invasive medical procedures and operations.
- The person doesn't respond to treatments in a predictable fashion.
- Other people in the patient's life don't confirm the person's symptoms.

### **Treatment of Munchausen syndrome**

Treatment aims to manage rather than cure the condition, but is rarely successful. Recovery tends to be slow or non-existent. Treatment options may include:

- Medications to treat associated mental disorders such as depression or anxiety. Unfortunately, a person with Munchausen syndrome may misuse prescription drugs to provoke symptoms for further medical intervention.
- Cognitive behaviour therapy (CBT) may help to change the person's beliefs and actions. However, it is unlikely that someone with Munchausen syndrome would admit to falsifying symptoms, which can make progress difficult. Some people with Munchausen syndrome flatly refuse psychiatric help.
- Avoiding unnecessary tests and surgeries is important to reduce the risk of complications. This can be aided by encouraging the person to go to only one primary care doctor. However, a person with Munchausen syndrome is likely to move on to other doctors and start again.

### **Munchausen syndrome by proxy**

Munchausen syndrome by proxy (MBP) was the term previously used for a rare but serious form of abuse where a person either fakes or produces symptoms in someone else, usually their child. In Australia, MBP is now known as 'fabricated or induced illness by carers' (FIIC), to distinguish it from the mental disorder Munchausen syndrome. In

Australia, FIIC is considered child or victim abuse, rather than a mental disorder.

In cases of FIIC, a carer may deliberately poison or harm a child to procure unnecessary tests and medical procedures.

The most common form of abuse appears to be apnoea (stopping breathing). The child may be revived by ambulance officers and taken to hospital, where all tests prove negative. Sometimes the child doesn't survive the carer-induced apnoea.

FIIC is very rare, with estimates suggesting that between 15 and 24 cases occur in Australia every year. The mother is the perpetrator in most cases. However, this is thought to reflect the high number of women who take on the role of primary caregiver.

### **Where to get help**

- **Your GP** – for information and referral
- Community mental health service
- **Australian Psychological Society** Tel. 1800 333 497
- **Mental Health Carers Australia** (formerly ARAFMI) Tel. 1300 554 660
- **Child Protection Crisis Line** (24 hrs, 7 days a week) Tel. 13 12 78

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