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IS FEIGNED PSYCHOSIS A PATHWAY TO SCHIZOPHRENIA?

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Factitious disorders (FD) are characterized by intentional production of either physical, psychological or mixed symptoms that mimic various clinical syndromes, with no apparent advantage for the individual concerned other than allowing him to assume the sick role. Large body of work has been accumulated on FD, but the majority of published data deal with the physical variant of the disease, with comparable few reports on psychiatric FD. Although there are many different presentations for psychiatric FD, the factitious psychosis subset justifies particular attention. Factitious psychosis may be prodromic of a genuine chronic psychosis, usually in the context of a personality disorder. Published data shows Munchausen psychosis, a severe subset of FD psychosis, with a prevalence of 0.25% of all inpatient admissions and global FD psychosis attaining 4.1% of all diagnosed psychoses, generally with a poor prognosis.

The scantiness of studies on the subject of psychiatric FD and factitious psychosis in particular, despite its significant prevalence, coupled with the fact that its recognition embarks on a radically different approach compared with the physical variant, stresses the need for case reporting.

We present four clinical cases with discussion of the underlying pathology and outcome, and a systematic review of the literature of FD psychosis case reports. This is followed by further discussion addressing the recognition of factitious psychosis, its etiological contributing factors, management, effects on staff and diagnostic criteria.