# A case of Shared Psychotic Disorder with Deadly Outcome

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#### Abstract

Shared psychotic disorder also known as folie a dues is thought to occur in persons who live close together, so that delusions of the primarily ill patient are transferred to the partner. A case of shared paranoid psychotic disorder, with primary diagnosis of persecutory delusional disorder in the husband is described. The delusion and its consequent safety behaviors were so strong that led to the family complete isolation, ceasing their relationship with the external world, gradual starvation and death of the daughter. This case showed how one's mind can act so badly against itself to the extend of starvation and dying. We think it is the most tragedy case report of shared psychotic disorder.

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Keywords • Paranoid • delusion • shared psychotic disorder

### Introduction

elusional Disorder (DD) is diagnosed when nonbizarre delusion is present for at least one month's duration and other psychiatric disorders are excluded.<sup>1</sup> Persecutory delusion is the most common type. Shared psychotic disorder (SPD) also known as induced psychotic disorder, folie a deus, folie impose and double insanity was first described by Lasegue and Falret.<sup>2</sup> The disorder is characterized by transferring the delusion from one person to the other who are closely associated for a long time or live together in a relatively social isolation. The individual who first has the delusion is the influential member while the secondary one is frequently less intelligent and more passive,<sup>3</sup> and if the pair separates, the other may abandon the delusion.<sup>2,3</sup>

SPD may occur in relatives for example parent-offspring, sibling-sibling so a genetic predisposition is assumed.<sup>4-6</sup> There are also case reports of SPD in non-relative partnerships like wife and husband that represent the role of environment in inducing psychosis.<sup>7-9</sup> Here we describe a case of SPD with the delusion of the primarily ill patient, the husband, adopted by the second partner, the wife. The couple did not have any biological relationship. This case highlights the importance of environmental and social factors in causing psychosis and how one's thoughts can be dangerous and self-destructing to the extend of starvation and miserable dying.

# **Case Report**

The husband was a 33-yr-old man college graduate in law. His problem started about 1.5 years before the time of becoming suspicious to his colleagues by thinking that they were linked

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Arash Mowla MD, Department of Psychiatry, Shiraz University of Medical Sciences, Hafez Hospital, Shiraz, Iran. **Tel/Fax:** +98 711 6279319 **E-mail:** mowlaar@sums.ac.ir to evil forces and wanting to hurt him. At first he had several arguments with them in the office and accused one of them of planning against him which led to a physical fight. He then was fired from work and this made him more withdrawn from the society. His paranoid delusions gradually became more generalized and included his close relatives and neighbors. Finally he thought the best way to avoid the satanic people was to avoid them.

The wife was a 27-yr-old high school educated housewife. She was not relative with her husband and they were living for nine years. They got two daughters of four and six yrs old. She had dependent personality traits and was submissive in their marital relationship. She was the only mate of her husband. Gradually, she also developed the same persecutory delusions about outdoor people. They did not have any insight and could not seek psychiatric help.

Finally they locked their house' doors and avoided the outdoor people. They also didn't let any of their relatives or neighbors in. Their social fear was strong to the extent that they didn't even go out for getting food. The family's storage of food got to the end. The flowers, wooden things and any other consumable materials also were eaten. Finally the younger daughter did not survive and finally died due to hanger. They hold her in a blanket. The malodor of the dead body disturbed the neighbors therefore, they called the police. The police got into the house and found them in a catastrophic condition.

They were referred to a medical hospital and then to psychiatry ward. The husband was pale, cachectic, and fearful about the people and was not cooperative with the medical staff. He had persecutory delusions that other people are planning against his family and wanting to harm them. There was negative history of auditory or visual hallucination. He was admitted in the psychiatry ward with diagnosis of persecutory delusional disorder according to DSM-IV criteria.<sup>10</sup> Respiridon was started for him four mg two times a day. After four weeks he responded a little, so the dose was increased to four mg three times a day. The delusions became shaky, but were not completely disappeared.

The wife was also cachectic and ill looking. In the interview, she seemed worried about the people around her and looked them suspiciously. She had the same persecutory delusions as her husband. She had no history of any psychiatric disorders before this episode and her family history also was negative too. She was diagnosed to have SPD according to DSM-IV criteria. She was separated from her husband and twenty days after that her problems disappeared. She found insight about their disease. She developed depressed mood became regret and guilty of what had happened to their daughter.

Their older daughter was also significantly ill. She barely talked and examining her mental status was impossible. If she had been included in the psychotic association of her parents, then we could consider folie a famile for them. The girl was admitted in pediatric ward and nutritional therapy was started for her.

In six month follow-up, the father still had some residual persecutory delusions with partial insight the mother was free of persecutory delusions but somewhat depressed, and the little daughter improved physically but seemed withdrawn and irritable and was under psychotherapy.

## Discussion

Shared Psychotic Disorder is a rare condition seen in the psychiatric fields and its exact incidence is not precisely known. Here a case of shared paranoid delusion is described. The intensity of the resentment and negative emotion accompanying the persecutory delusion was so high that made them in complete social isolation.

Silveira analyzing published case reports from 1942 to 1993 that met DSM-IV criteria for SPD found that: 1) males and females were affected with equal frequency; 2) there was equal prevalence in younger and older patients; 3) the majority of shared psychoses were equally distributed among married couples, siblings, and parent-child dyads; 4) comorbid dementia, depression, and mental retardation were common; 5) hallucinations were common; and finally 6) the majority of dyads were socially isolated.<sup>11</sup>

Environmental factors are associated with later risk for schizophrenia and other psychotic disorders.<sup>11-13</sup> When SPD was found in husband-wife constellation, the role of environment in causing psychosis could be demonstrated. Dipple and colleagues described a case of folie a six in which the persecutory delusions of the central figure spread to the husband, the two sons, sister-in-law and their nefews.<sup>14</sup> This report indicated that the delusion can be transferred to other people regardless of being biologically relative or not.

SPD is a rare psychiatric condition that might cause diagnostic problems especially if the partners are consanguineous.<sup>15</sup> The question is that "whether the supposed secondary patient suffers from a transmitted delusional belief or from an independent endogenous psychosis." Leonhard and colleagues defined a group of unsystematic schizophrenia showing predominantly delusional Shared psychotic disorder in a family with deadly outcome

symptoms that is called affect-laden paraphrenia (AP).<sup>16</sup> Reif supposed that a substantial portion of reported SPD cases in relatives actually represent AP in both patients.<sup>17</sup> This is an important point that should be kept in mind while describing SPD cases.

Shimizu and colleagues in an analysis of delusional statements from 15 Japanese Cases of Folie a Deux concluded that in SPD "We typed" statements are used to describe the delusion like "We are persecuted".<sup>18</sup> The couple in our case also believed that they were persecuted and used "We typed" statements.

On the basis of theoretical considerations, interventions that aim at separation in psychological terms are necessary to achieve favorable long-term treatment results.<sup>19</sup> There was a dramatic response in the wife, in our case, after being separated from her husband. For preventing such tragedy cases to happen again, to the author's idea there should be better psychoeducations for the families, more social supervisions from the government and easily in touch psychiatric services. In conclusion we think that this case report is the most tradedy SPD that has ever been described in literature. It shows how human's delusion could be so destructive and catastrophic to the extent of starvation and dying. This case report emphasis on the role of surrounding environment in developing and waning of delusions in the secondary partner with shared psychotic disorders.

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