

A Complex Case of Feigned Psychosis or Hidden Truths? A Case Report

Dr Monette Dimitrov

Central Mental Hospital, National Forensic Mental Health Service, Ireland

Dr Patrick McLaughlin

Central Mental Hospital, National Forensic Mental Health Service, Ireland

Abstract:

This case report presents a 31-year-old male with a history of paranoid schizophrenia, whose recent admission to the Central Mental Hospital (National Forensic Mental Health Service in Ireland) was prompted by a relapse of psychosis and charges of serious assault, property damage, and possession of a sharply pointed weapon. His admission raised suspicions of symptom feigning. Despite four years of engagement with mental health services (MHS), the patient disclosed shortly after admission that he had been feigning his symptoms to gain external incentives including an insanity plea, and now hopes to return to prison for more freedom and plead guilty. However, collateral information from the community MHS and family members suggested underlying psychiatric concerns, complicating the diagnosis and raising the possibility of dissimulation whereby the patient may be concealing true psychiatric symptoms to present a facade of mental well-being, wary of psychiatric stigma.

The case highlights the significant challenges in distinguishing genuine psychiatric illness from deceptive behaviour, such as malingering and dissimulation. The patient's history includes delusional beliefs, auditory hallucinations, passivity phenomena and manipulative tendencies, with psychological assessments pending to provide additional insight into the diagnosis. Differentiating between genuine psychosis and feigned symptoms is complex, requiring comprehensive assessments, collateral information, and the use of standardized psychological tools as adjuncts to support the diagnostic process.

This case underscores the importance of a thorough and multidimensional approach to psychiatric evaluation, considering both the potential for feigning and the presence of underlying psychiatric pathology. Clinicians must navigate these complexities to provide appropriate treatment, reduce healthcare costs, and ensure public safety.