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Research Article

## MUNCHAUSEN BY PROXY SYNDROME

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### ABSTRACT

*In this study, the main aim is to shed light onto the Munchausen by Proxy Syndrome news case articles from Turkey and the USA as well as to increase awareness related to the topic. Munchausen Syndrome by Proxy is a form of child abuse and as the perpetrator of the abuse mostly a parent of the victim, it is not easy to prove the abuse by the medical staff. Most of the time, the perpetrator is 'mother' of the child, who fabricates a story about the child's sickness and seeks for medical attention for the child.*

**Key words:** *child abuse, Munchausen by Proxy Syndrome, news case article, victim*

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### Introduction

Child abuse has been a predominant issue among the violence against human cases because children are the most vulnerable members of the society and this vulnerability makes them the easy target of violence and abuse. Especially the children around the age of 2 are mainly the target of physical abuse as they cannot easily resist the act of violence and they are still dependent on their caregivers.

The physical abuse of the child has a broad spectrum from beating to sexual harassment and even causing the death of the child. "The range of child abuse is wide. In physical abuse, the border that begins with a slap can reach as far as killing" (Polat, 2017). As Polat described, the physical abuse of the child is a broad term and it must be defined and recognized in a specific framework in order to protect the child and convict the perpetrator accordingly.

As a form of child abuse, Munchausen by Proxy may not be commonly known by the public since the MBPS cases cannot easily diagnosed by the medical staff. One of the main reasons of that is mostly the perpetrator is the mother of the victim child and naturally mothers

are perceived as the protector of the child and as a result of that common perception of mothers, it is not first suspicion of the physicians who are examining the sick child with several stubborn symptoms of an illness or several additional illnesses. Another issue is that even if a medical doctor has a suspicion of a fictitious story of an illness on a child, he/she must prove and assure the authorities with the medical evidence and in that sense it is really crucial to collaborate with the other medical staff for the credibility of the medical story told by the mother of the sick/victim child.

Thus, the initial aim of the article is to shed light on Munchausen by Proxy Syndrome as a form of child abuse through the news article cases from Turkey and the USA and to increase the awareness in the public about the physical and mental consequences of Munchausen by Proxy Syndrome on the victims.

In order to grab attention to the significance of the phenomenon, through this article three cases from Turkey and one major case from the USA have been analyzed with respect to the etiology and prevalence of the syndrome. What the Munchausen by Proxy Syndrome and how it affects the victim and what the profiles of the perpetrator and the victim as well as the reasons why it is challenging to diagnose the syndrome will be primarily discussed throughout the article.

## **1. MUNCHAUSEN BY PROXY SYNDROME: THE DEFINITION AND THE PROFILE OF VICTIM AND PERPETRATOR**

Before defining Munchausen by Proxy Syndrome, it is significant to define Munchausen Syndrome which is the syndrome of a person's fabricating a disease on himself / herself and presents himself / herself to the medical community as a patient and seek for medical help. It is the syndrome that entered literature when the German Baron Karl von Munchausen wandered from town to town and made up stories that turned out to be lies and later on the community began to call him the Baron of Lies and the syndrome named after him.

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In this syndrome, a person attracts the attention of medical professionals and medical staff by making up stories that are not authentic about his mental or physical condition, and exposes himself to improper treatment, and also misleads medical staff.

On the other hand, Munchausen by Proxy Syndrome also known as factitious disorder by proxy can be described as the deliberate fabrication of physical or psychological signs / symptoms in another person who is under the care of the person.

The *DSM-IV* outlines the following criteria for factitious disorder by proxy:

- A. Intentional production or feigning of physical or psychological signs or symptoms in another person who is under the individual's care.
- B. The motivation for the perpetrator's behavior is to assume the sick role by proxy.
- C. External incentives for the behavior (such as economic gain) are absent
- D. The behavior is not better accounted for by another mental disorder (American Psychological Association, 2000).

“In MBP abuse investigations, the majority of the identified victims have been children. The most frequently accessed substantive criminal charges with and MBP factor are child abuse, endangerment, or related offenses including homicide.” (Artingstall, 1998)

“The average age of children at diagnosis is 48.6 months, or 4 years; 75% of all children involved in MSBP diagnoses are younger than 6 years old at the time of diagnosis. The average length of time symptoms persisted before diagnosis was 21.8 months.” (Walk et al., 2010)

As it is mentioned above, in majority of Munchausen by Proxy cases, the victims are mainly the children at early ages and the perpetrator is mostly one of the parents, who is the mother of the child in particular according to many researches.

According to Sheridan (2003); in 57.2% of cases examined, the parent caused symptoms in the child. Overwhelmingly, research indicates that a child’s birth mother is the abuser in cases of MBP. However, in 7% of cases fathers have been found to abuse through MBP. Beyond the gender of the parent, it is difficult to gather consistent information from the case study articles frequently seen regarding MBP because they appear in medical journals in which background information about perpetrators has been eliminated. In research where it is available, perpetrators have often been found to have professional training in health care. The most common occupation of MBP perpetrators is nurse, followed by nurse assistant (Sheridan, 2003).

During the abuse, the victims of MBP may have several physical symptoms of diseases as the perpetrators systematically seek for malpractice of the treatments on victims. As a result of the medication abuse or malpractice on the victims, the symptoms may result in the deaths of them.

According to Sheridan's review (2003); 451 cases were stated that they were admitted to the hospital with the symptoms of respiratory arrest (27%), eating disorders (25%), diarrhea (20%), impaired consciousness (17.5%), bruising (12%), behavioral disorder (10%), asthma (9.5%), allergy (9%), fever (8.5%) were stated that he was admitted to the hospital with his findings. It is also known that one or more of these symptoms have been observed.

A single factor affects more than one system, especially in poisoning. It includes the symptoms of respiratory system diseases such as apnea, sudden infant death, asthma, cystic fibrosis; the symptoms of digestive system diseases such as vomiting, bleeding, diarrhea; the symptoms of hematological diseases such as bleeding, anemia; the symptoms of dermatological diseases such as infections, skin integrity disorders; the symptoms of toxic poisoning such as kidney, vomiting, bleeding, diarrhea and the symptoms of neurological diseases such as muscle weakness, loss of consciousness. (Sheridan, 2003)

In order to diagnose Munchausen by Proxy Syndrome at the early stage is vital for saving the victim from the abuse and doing so, the healthcare staff must be alert and pay attention to the indicators of MBP.

According to Artingstall (1998); MBP indicators are:

- Unexplained and prolonged illness that cannot be diagnosed by experienced physicians. Illness(s) are often described as so unique that physicians remark they have never seen anything like it before.
- Repeated hospitalizations and/or medical visits.
- Extensive medical tests that fail to produce a diagnosis.
- Symptoms that do not make medical sense.
- Persistent failure of the victim to respond to therapy.
- Signs and symptoms that dissipate when the victim is removed from the sole presence of the offender.
- Caretakers who do not seem worried about their child’s illness but are constantly at the child’s side while in the hospital.

- Mothers who have an unusually close relationship with the medical staff.
- A family history of Sudden Infant Death Syndrome (SIDS)
- Mothers with previous medical or health-care experience who have a history of the same type of illness as their child.
- A parent who welcomes medical testing of the child, even if painful.
- Attempts to convince the medical staff that the child is still ill when advised that the child is to be released from the hospital.
- A model family that normally would be above suspicion.
- A caregiver with a previous history of Munchausen Syndrome.
- A caregiver who adamantly refuses to accept the suggestion that the diagnosis is non-medical.
- Caregivers who speak about the child's illness as if it were their own.
- Caregivers who speak for their children when conversation is directed specifically to the child.

Because the diagnosis of MBP cases is challenging for the healthcare staff, it is crucial to familiarize themselves with the profiles of the victim and the perpetrator.

Artingstall (1998) profiles the significant characteristics of MBP victims as:

- Dependant
- Display separation anxiety
- Immature
- May enter into a symbiotic relationship with the mother
- May collude with the offender
- May view the offender as an ideal parent
- May utilize alternative communication options
- May passively tolerate medical procedures (in the offender's presence)
- Excessive school absence/inappropriate learning levels
- Not involved in normal social developmental programs/activities
- Failure-to-thrive may be present
- May be utilized as emotional leverage in court proceedings

and the common traits of MBP offenders are as follows:

- Described as "Great Pretenders"- the last people you would suspect of being child abusers.
- Most often the biological mothers of the victims.
- Welcome medical tests that are painful to their children.
- Excessively praise the medical staff.
- Seemingly knowledgeable about the victim's illness(s).
- Some degree of medical education (either formal or via self-initiated study/experience).
- May have history of the same illnesses as their children.
- Shelter victims from outside activities (school or play with other children).
- Maintain a high degree of attentiveness to the child victim.
- Seem to find emotional satisfaction when the child is hospitalized because of the staff's praise of their apparent ability to be a super-good parent. (Artingstall, 1998)

As a result, the early diagnosis of Munchausen by Proxy Syndrome cases is critical so as to prevent the abuse soon and save the victim from the side effects of malpractice and probable death.

## **2. METHODOLOGY**

In order to select the cases from Turkey and the case from USA, several news portals were searched through such as 'abc News', 'Radikal' and 'Milliyet'. The news cases have been browsed between the years 2005-2019. The selection was proceeded randomly.

Prior to the selection of the news cases, the literature review on Munchausen by Proxy has been proceeded to define the syndrome and analyze the cases in the framework of the literature.

The main intention to choose three cases from Turkey is that it is not a very easy syndrome to be determined by the medical staff since culturally the mother of the child cannot be reckoned as the potential danger to the child, so once the cases have been determined by the medical staff, they take the attention of the media and the public, however the public has not been familiar with the syndrome. For that reason, three Munchausen by Proxy Syndrome cases have been picked up by the media in Turkey. On the other hand, in the USA, through the aforementioned time period, many cases have been recorded yet the most predominant case among all was the 'Gypsy Rose Blanchard' case as it was a twisted plot at the end of the story where the victim (Gypsy) turned into the perpetrator. Thus, as a big major case the 'Gypsy Rose Blanchard' case from 2015 was selected to be analyzed in the article.

## **3. MUNCHAUSEN BY PROXY NEWS ARTICLE CASES**

### **a. Cases from Turkey**

#### **Case I:**

#### **The name of horror 'Munchausen syndrome'**

26-year-old F. H., who was arrested for killing 2 girls born diseased in Samsun and trying to kill 1 child by covering his nose in the hospital room where she was treated, was diagnosed with 'Munchausen Syndrome by Proxy'. After the latest incident, it was claimed that F.H., who was detained at 19 Mayıs University Medical School, encouraged her child, who was not ill, to develop real diseases. Doctors in the Department of Mental Health Diseases as a result of their research expressed that the baby's epilepsy complaints developed after the mother's mouth-closing behavior, the mother engaged in behavior to create the disease in her child. The report, which was described as 'Munchausen Syndrome by Proxy', suggested that the previous deaths may have been due to the mother's behavior in a similar way, as the two previous children had similar complaints. In addition, the Family and Social Policy Provincial Directorate of the Family Consulting Center and the Prosecutor General's Office of the Republic informed Ö. H. (the child) should be protected. F. H., who was detained and admitted in her testimony that she killed 2 children herself and tried to kill Ö. H., did not accept the charges to the public prosecutor who took her statement and then at the hearings. F. H., who completely changed her statement, said that her 2 daughters died of natural causes because they were sick, "Ö.H. was not diagnosed. I pressed my hand against her mouth with the thought that the doctors would come to make a diagnosis, I pressed the button, but no one came. Then I took my hand out of her mouth. When my husband came to me, I told my husband what I had done," she said. She was sentenced to two life sentences for the murder of her two daughters and up to 24 years for the attempted murder of Ö.H., while the court said the young woman was referred to the Mental and Nervous Diseases Hospital to investigate whether she had criminal liabilities, but her report has not yet been released. (Hürriyet Newspaper, 2014)

## **Case II:**

### **E. G.'s mental health is normal**

E. G., who appeared at his first hearing in Istanbul's 5th Criminal Court for allegedly trying to kill his five-year-old son F., who was being treated at Istanbul University Medical Faculty Hospital, by drinking anti-lime scale, claimed that her children had a habit of eating chemical substances they found. Doctors suspect Munchausen by Proxy Syndrome.

E. G., who may have killed her daughter H. N. by poisoning her earlier, said: "The toilet in the room where F. slept was very dirty. That's why I was cleaning it. I bought a lime solvent. In the bag I put the lime solvent, there was a chewing gum. F. took one of these and chewed it while I was not in the room. Maybe the chewing gum is also contaminated with lime solvent" she said.

"When my wife stayed with them, their illnesses escalated, but when my mother was with them, they were cured," says G.'s husband, I. G., who believes that his wife poisoned the children.

The court asked that G.'s psychiatric condition to be investigated. The doctors' first suspicion was that Munchausen by Proxy. E. G., who passed the Multifaceted Personality Inventory test at Bakırköy Mental and Nervous Diseases Hospital, was normal in all evaluations. In this case, there were no obstacles to G.'s trial. (Hürriyet Newspaper, 2006)

## **Case III:**

### **Munchausen by Proxy Syndrome Model: Oh My Dear Mommy!**

7-year-old M.B.D. lying in the Department of Child Health and Diseases of Istanbul Medical Faculty Hospital. She cannot get better, but the funny thing is, she gets better when her mother's gone, and she gets worse when her mother comes back. The little girl was admitted to the hospital on November 1, 2003, complaining of abdominal pain and long-term sleep, but despite all the tests, she could not be fully diagnosed. Doctors said that during treatment, when her mother arrives, M.B.D. experiences seizures of respiratory arrest and becomes ill, and when his mother leaves, she returns to normal. Doctors, frustrated by the situation, begin to monitor the mother. N. D., who came to see her daughter on April 6, 2004 she brings a cake to those on duty and enters her daughter's room. The little girl starts vomiting, she stops breathing again. (At that time, the mother tries to push the nurses away, saying, "Don't be nauseous, you eat your cake, I'll handle it") Entering the room, the doctor finds two bloody injectors. The mother gives contradictory answers regarding these injectors. In addition, it is believed that the mother may have 'Munchausen Syndrome', indicated in the minutes, referred to the prosecutor's office. The prosecution is preparing for the mother to be tried for 20 years in prison. N. D. denies the charges. (Radikal Newspaper, 2005)

### **The analysis of the Munchausen by Proxy Cases from Turkey**

It is a common belief that the mother of a child is not likely to harm the child however, the Munchausen by Proxy Syndrome cases from Turkey prove vice versa. Among the cases, the age of the victims ranges from being a baby to the age of 7 so the children are still dependent on their caregivers and that makes them easy targets for the perpetrators. When the profiles of offenders are investigated, it can be seen that the offender is in complete denial of the abusive act and defends herself by claiming to save the child's life or trying to help the medical staff. In all these three cases, the offender denies the allegations however after being convicted they do not state any remorse or regret when it is thought they purposefully try to harm their children. That shows another typical personality trait of the offender which is narcissism, the offender

seeks for empathy and appreciation of other people by picturing themselves as devoted, loving and caring mothers yet the well-being of the victims proves the opposite.

In the cases from Turkey, it is relieving that the offenders are caught red-handed and convicted.

As a result, the attention of the healthcare staff helped to diagnose and solve the cases and saved the lives of the victims so it can be stated that the role of the healthcare staff is distinctive to diagnose the MBP cases.

## **b. The Case from the USA**

### **The Case of Gypsy Rose Blanchard (The USA)**

How a young woman forced to use a wheel chair, treated for several illnesses ended up in prison for her mother's murder.

Gypsy Rose Blanchard grew up not knowing much about the world outside of doctors' offices, hospital rooms and the pink house in Missouri where she lived with her mom, Claudinnea "Dee Dee" Blanchard.

By the time she was 8 years old, Gypsy Blanchard was allegedly suffering from [leukemia](#), [muscular dystrophy](#), vision and hearing impairments and seizures. Gypsy also used a wheelchair to get around and a feeding tube for nutrition and medicine.

In her world of constant medications, surgeries and treatments, Gypsy said, other than her stuffed animals, her mother and caregiver Dee Dee was her best, and, sometimes only, friend.

"We got along so perfect. You know, I saw her as an angel that can do no wrong," Gypsy, now 26.

"There are certain illnesses that I knew I didn't have. I knew that I didn't need the feeding tube. I knew that I could eat, and I knew that I could walk, but I did believe my mother when she said that I had leukemia," Gypsy said. "Because I was taking lots of medications, and mom said that they were for cancer, and she would shave my hair off and said, 'It's going to fall out anyway, so let's keep it nice and neat.'" "Medical records reviewed by ABC News show that Gypsy was treated by at least 150 different doctors through the years. During a typical appointment, Gypsy said she would play with a doll or stuffed animal while her mother talked with the doctor. "Mom would say, 'Don't talk. Just play with your stuffed animal, and we'll do something fun after,'" Gypsy recalled. "The one thing that is absolutely common across every single medical record is that Gypsy never spoke," Mike Stanfield said. "Every single medical record says, 'Mother reported.' 'Mother states.' 'History by mother.'"

### **The analysis of the Munchausen by Proxy Case from the USA**

In this case, Dee Dee Blanchard (Gypsy's mother) gained both tangible and intangible benefit by exploiting good will of the community because she pleaded a house from the community. However, after two decades of systematic abuse, Gypsy manipulated her boyfriend Nicholas Godejohn to stab her mother in 2015. The murder of the mother revealed the whole truth behind the scene as well as the almost a two-decade long child abuse and the fraud. The community was so shocked that the county sheriff described the case as "The longest financial fraud scheme ever happened in the US history". Dee Dee Blanchard (the mother) merely scammed her ex-husband for more than \$150,000 by claiming that she needed the money for Gypsy's treatment and on top of that, the donations from the celebrities and the community can be counted as the financial benefit of the perpetrator which is common in Munchausen by Proxy cases.

When it is taken the profiles of Dee Dee (the offender) and Gypsy (the victim) into account, it can be stated that Dee Dee pictured herself as the loving, caring and devoted mother however, she was constantly abusing her child. As Artingstall (1998) mentions that “In some cases, psychiatric disorders such as hysteric personality, borderline personality, narcissistic personality, depression or others may be present, however an understanding of right and wrong behavior is almost always present in the offenders’ minds.” From this perspective, when the crime scene footages were shared on the news, it is proven that the house was in total mess which proves that Dee Dee was a hoarder and obviously suffering from depression however unlike to hoarders’ behaviors, the only neat place in the house the cupboard she kept Gypsy’s medicines and the effects of the each pill were noted on the medicine bottles that proves that she was aware of her actions. Another interesting fact about Dee Dee Blanchard (the mother) is that she went to a college for a while and worked as a nurse at a hospital, so she was knowledgeable about the pharmaceuticals, which also fits the profile of an MBP offender as well. Besides, she never allowed Gypsy to talk about her illnesses instead she always described the symptoms to the physicians herself. This is also one of the common traits of the perpetrators of MBP.

On the other hand, Gypsy Rose Blanchard is extremely obedient and dependent on her mother. She was never allowed to make friends and homeschooled which is also very typical of Munchausen by Proxy victims. In addition to that, Dee Dee was lying about Gypsy’s actual age by saying she is just 14 or 15 years old even after she actually turns 18. It was easy to hide the truth for Dee Dee (the mother) because Hurricane Katrina has destroyed their house and they lost all important documents so Gypsy’s birth certificate has been lost during the hurricane and it was prepared again so Dee Dee forged Gypsy’s birth certificate by registering her age younger with the intention of being the guardian of Gypsy longer. As a result of that, although Gypsy knew that she was 18, Dee Dee was insisting that Gypsy remembers wrong because of all the medicines she has been taking. She claims the same when Gypsy’s father called to celebrate Gypsy’s 18 birthday that he does not remember the birth year of her correctly by saying that she has turned 15. By doing that, she continued the fraud and abuse for longer time and she got the guardian benefit and donations of the community who are willing to support Gypsy for years and years by playing the role of a loving caregiver/mother.

However, the plot twisted when Gypsy met Nicholas Godejohn online and started a romantic relationship with him as she became rebellious against her mother and disobeyed her and Dee Dee (the mother) physically abused Gypsy and threatened her not to take her outside at all. That’s when Gypsy triggered and decided to convince Nicholas (the murderer of Dee Dee) to murder her mother and collaborated with him.

Gypsy Rose Blanchard apparently turned from MBP victim into a second-degree murderer which is very rare in the MBP cases as majority of the victims end up being killed by the perpetrator.

In 2015, she was sentenced to 10 years in prison with a second degree murder by pleading guilty. Gypsy is eligible for parole in 2024. She will be 32 years old. On the other hand, Nicholas Godejohn was sentenced to life in prison with no possibility of parole.

There are several documentaries and even a TV show titled “The Act” based on Gypsy’s story. During one of these documentaries, Gypsy expresses that she feels much better and freer in the prison which proves the extreme suffering of her from Munchausen by Proxy abuse.



#### **4. CONCLUSION**

In conclusion, it can be stated that in majority of Munchausen by Proxy cases, the victim is the child and the offender is the mother. Physical, medical and/or psychological abuse occurs systematically in MBP cases. The caregiver (mother) seeks for attention and mostly the offender has narcissistic, hysteric and depressed personality. On the other hand, the victims are dependent onto the offenders. The offender never believes that she is abusing the child rather has a strong belief that she is saving the child's life. Thus, the attention and awareness of the medical staff is vital on Munchausen by Proxy cases to save the child's life. Yet, it is not easy to diagnose Munchausen by Proxy Syndrome immediately since the caregiver is mostly the mother of the victim child and she is naturally considered as the guardian and the protector of the child so the attentive observation of the medical staff is crucial in order to determine the syndrome in case of suspicion of the existence of the abuse and collecting the criminal evidence and providing them to the authorities for further investigation and conviction of the offender are very vital for the justice and the protection of the child's rights and even saving the victim child's life in many cases. Artingstall (1998) stated that "MBP is distinctive from other known forms of child abuse because the testimony, cooperation and conviction of medical personnel is often compulsory in establishing criminal proof of MBP existence, medical conviction is often intertwined with criminal investigatory product."

In this article, three cases from Turkey and one major case from the USA were analysed within the framework of the etiology and the prevalence of Munchausen by Proxy Syndrome in regards of elevating the awareness in public and prevent the perpetrators to get away with their abusive acts. Unfortunately, Munchausen by Proxy Syndrome cases shed light onto the bitter reality that the mothers are not always saviours of their children. Thus educators, medical staff and physicians should be alert with the children suffering from persistent symptoms of several different illnesses and should take an action to prevent the abuse of the child by contacting the authorities abruptly.

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