Brief Communication

A case of malingering by proxy described in 1593

Erwin J.O. Kompanje *

Erasmus MC University Medical Center Rotterdam, Department of Intensive Care, P.O. Box 2040, 3000 CA Rotterdam, The Netherlands

Received 28 August 2006; received in revised form 5 January 2007; accepted 30 March 2007
Available online 17 September 2007

Keywords: Malingering by proxy; Hildanus

Introduction

Between 1598 and 1641, the famous surgeon Guilhelmius Fabricius Hildanus (1560–1634) (Figure 1) published 600 medical and surgical observations in the Observationum et curationum chirurgicarum centuriae I–VI (Hildanus, 1646). Each observation is illustrated by one or more case-histories. The natural history of the condition and the invented treatment are discussed. One of the case reports published as Observatio 18 in the third Centuria bears the title “An artificial hydrocephalus.” Here this case report is discussed in more detail.

Life and work of Hildanus

Guilhelmius Fabricius Hildanus (1560–1634) was born at Hilden, Germany on 25 June 1560 as Wilhelm Fabry (Figure 1). In 1576, at the age of 15, Fabricius started a training in surgery at Neuss, a place near Düsseldorf. In 1587 he married the female surgeon and obstetrician Marie Colinet at Geneva. She assisted her husband with many operations and took care of most obstetrical cases. Hildanus described his wife as a skillful colleague surgeon, but stressed that she did not neglect the care of their eight children and housekeeping.

He spent a considerable part of his life traveling and lived and worked in Germany, Switzerland, France, and The Netherlands. Hildanus himself suffered from a severe neuralgia in the sole of his foot, bronchial...
catarrh, asthma, and gout. Hildanus died on 15 February 1634 at Berne from bronchial asthma. He left a widow and John, the only son (of eight) who survived him. John was a surgeon like his father. Hildanus was buried at Berne.

Despite his traveling life, Fabricius was a prolific author and is best known from his “Centuriae.” Most books were published in Latin and German and some in French, but many were translated in other languages (Jones, 1960a, 1960b).

Six hundred medical and surgical observations, reflecting the practice of a skilled surgeon in the end of the 16th and first half of the 17th century, are described in the Observationum et curationum chirurgicarum centuriae I–VI. Each observation is illustrated by one or more case-histories from the varied practice of Hildanus. The natural history of the condition and the invented treatment are discussed. In the case of a surgical treatment, a detailed description of the operation and the instruments used is given. Many instruments are illustrated in clear wood-cuts. Many cases were followed for years, providing a clear view of prognosis and long-term results of surgical procedures. Several observations include summaries of similar cases seen by Hildanus acquaintances and their views on treating the same condition or disease. The first 25 observations were published in 1598 at Oppenheim. The complete set
of the first 100 observations (including the first 25) was published in 1606 at Basle, the second 100 at Basle and Geneva in 1611, the third at Oppenheim and Basle in 1614. The fourth Centuria was published at Basle in 1619, the fifth at Frankfurt in 1627. The sixth set of 100 observations was ready in 1620, but published in 1641 in the first print of the complete set. A Dutch translation appeared in 1646 at Rotterdam, a French translation in 1669 at Geneva, and a German edition in 1780 at Flensbourg.

Case report

(Translated from the original report Observatio 18 in the third Centuria which bears the title “An artificial hydrocephalus” (Hildanus, 1646)).

In the year 1593, at the city of Paris a fifteen or eighteen months old boy, was shown to the public. The skin of the boy’s head was so distended that the size of the head exceeded all other heads: his parents showed their son from town to town as a monster, obtaining a considerable amount of money.

As the result of a flood of interested persons, assumption of fraud was raised by the authorities. The parents were imprisoned and questioned, confessed this gruesome and barbaric piece of roguery. Between skin and muscle on the top of the head of their child they had made, an opening, in which they inserted a small pipe, through which they inflated air, resulting in a considerable enlargement of the head during the following months. They showed the child in all cities as a wonder of nature, obtaining a considerable amount of money. The hole in the skin was made in such a manner that, when the small pipe was removed, the opening was easily closed with wax. The authorities, after hearing from the infamous and godless action, punished both parents, to pay their guilt with their lives.

The noble sir Lodovicus Wallier told me that he saw the child at Paris, and I thought it to be useful to recall this case here.

Discussion

In this case the child abuse can be seen as (1) factitious disorder by proxy or Munchhausen Syndrome by proxy (MSBP); or (2) malingering by proxy.

An individual who intentionally produces or feigns injury of illness may either be malingering or have a factitious disorder, in which the distinction is made on motivation behind the behavior. A malingering person has external motives (avoiding work or military service, obtaining money or drugs). A patient with a factitious disorder seeks secondary gain in assuming a sick patient role.

Factitious disorder by proxy or MSBP can be defined as deliberately producing or feigning of physical or psychological signs or symptoms in another person (usually a child) who is under that individual’s care. In this type of abuse, the perpetrator is usually the parent or caregiver who intentionally falsifies information concerning the child’s medical history or presenting signs or symptoms to meet his or her own self-serving psychological needs for attention and self-fulfillment.

By definition, the presumed primary motive in factitious disorder or MSBP is the attention or other gratification that comes from the association with the ill child. This has traditionally differentiated MSBP from malingering by proxy (Stutts, Hickey, & Kadan, 2003).

Factitious disorder, factitious disorder by proxy, MSBP are well defined in literature and DSM-IV. In contrast to malingering by proxy (Stutts et al., 2003). In DSM-IV-TR, malingering is classified under
“Other conditions that may be a focus of clinical attention” and is not considered to be a mental disorder or a psychiatric illness. Malingering is defined as the “intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives” (American Psychiatric Association, 2000). Malingering by proxy can co-exist with MSBP (Feldman, 2004).

The parents in Hildanus case do not fit in the definition of MSBP. They had not sought attention for themselves by visiting physicians or surgeons with their disfigured son, but had an external primary motivation for their action (financial gain). Without any doubt the child had been seen by interested members of the medical community: in the case report Hildanus mentioned one person, the noble sir Lodovicus Wallier. The parents were motivated to their actions from other public exhibitions of disfigured children and newborns at fairs, among those with congenital hydrocephalus. Children with congenital malformations were shown to the public on a regular basis (Bates, 2003, 2005; Kompanje, 2003; Serres, 1833), mostly to obtain financial gain. Many parents considered the birth of a malformed child as a blessing, by which they could obtain money. It was not very difficult for parents of the newborn to attract a crowd to see the (dead or alive) monstrous birth. Descriptions of such events mention often a crowd of thousand or more curious people to see the child. A pair of conjoined twins born near Salisbury in 1664 attracted thousand spectators: “This monster lived two dayes and then dyed, and is imbalmed, and to be brought to London to be seen. There hath been Lords, Ladys, and much Gentry to see it: The father (being a poor man) had twenty pound given him the first day, by persons of Quality. I Josiah Smith, Practitioner of Phisick, saw them all three alive (cited by Bates, 2005:147). Bates (2005) cited many other cases of events in which malformed children, mostly conjoined twins, but also a cyclopic child and a child with phocomelia, where shown to the public in order to obtain money. The famous 16th century French physician Paré described a public exhibition in Vienna of a pair of conjoined twins as early as 1475: “Because their parents were poor, they were carted around to several cities in Italy, in order to collect money from the people, who were burning to see this new spectacle of Nature” (Pallister, 1982).

The parents of the child described by Hildanus were without doubt inspired by such events. By inflating air between the skin and the skull of their unfortunate child they could mimic congenital hydrocephalus. Only a few cases of malingering by proxy are described in literature (Cassar, Hales, Longhurst, & Weise, 1996; Lu & Brauer Boone, 2002; Roberts, 1997; Stutts et al., 2003). The first two cases concern apparent fabricated mental illness in a child for collecting disability benefits. The third case concerns a child involved in litigation regarding a head injury. In the fourth described case a boy feigned an immobile upper extremity for the purpose of obtaining a legal settlement, and in the last described case a proxy incites an autistic student into violent behavior.

Without any doubt, the case described by Fabricius Hildanus in 1593 can serve as the earliest example of malingering by proxy. The motivation of the parents to disfigure their child was to obtain financial gain. To my knowledge this is the only case known in scientific literature in which the parents try to mimic a congenital malformation for their profit.

References


