Factitious disorders

People with factitious disorders pretend to have medical problems that they don’t have, in order to get medical attention, even if they don’t need it. It’s not clear why people do this.

Some people fake symptoms or harm themselves to get medical attention, while others fake symptoms in someone else - often their child - or harm them, to get attention.

If you think that you need help for a factitious disorder, or that someone close to you needs help, you can use our information to talk to your doctor.

If you’ve got good reason to believe that someone you know is harming someone else to get medical attention, tell the authorities immediately.

What are factitious disorders?

It’s unusual for a doctor to doubt what a patient tells them. When they do, it’s usually because someone is confused about their symptoms and about how to describe them.

But, rarely, a doctor has a good reason to think that someone is not being honest about their symptoms in order to get medical attention and treatment they don’t need.

When someone behaves in this way, doctors say that they have a factitious disorder (the word factitious means fake). An extreme example of a factitious disorder that you may have heard of is Munchausen syndrome.

Factitious disorders are rare and complex. It’s not clear why people are affected by them. And it’s possible that people who have them aren’t always fully aware of what they are doing or why.

A factitious disorder is not the same as faking a medical problem to gain something, such as drugs or disability benefits. People with factitious disorders seem to want medical attention for its own sake.

Factitious disorders can also be imposed on someone else. This is sometimes called a factitious disorder 'by proxy'. This means that someone pretends that someone under their care needs medical attention.
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Some people go as far as to harm that person, often a child, by giving them medicines that produce symptoms of an illness, or by injuring them. This is a dangerous form of abuse that can cause coma and even death.

If you think that someone you know is harming someone else to get medical attention, tell the authorities right away.

We’re not sure what causes factitious disorders, but the reasons are unlikely to be simple. For example, they could be signs of other complex problems or needs - a bit like a 'cry for help'.

Some possible reasons for factitious disorders are when someone:

• Feels a strong need to be the centre of attention
• Feels a strong need to be cared for
• Has a bad reaction to a loss in their life, such as a bereavement or the end of a relationship. Grief can make people act in ways they normally wouldn’t, and which they can’t always control
• Feels anger, or directs anger, towards the medical profession
• Gets pleasure from fooling others.

Factitious disorders are rare. But they seem more likely to affect:

• Women - although Munchausen syndrome is more common in men
• People with personality disorders
• Unmarried people, and
• People who work in health care or who have a parent who works in health care.

What are the symptoms?

Someone with a factitious disorder can seek needless medical treatment for themselves or for someone else.

When someone seeks needless treatment for themselves, they may pretend to have symptoms of a physical or mental-health condition. Or they may deliberately injure themselves, or do something to make themselves ill.

When someone seeks needless treatment for someone else - for example, their child - they may pretend that the other person is ill or injured. Or they may injure that person or do something to make them ill.

Factitious disorders and symptoms of physical problems

Not everyone with a factitious disorder behaves in the same way. For one thing, different people will go to different lengths to get attention. For example:

• Some people may simply exaggerate genuine symptoms to make themselves more interesting to their doctor. This is not helpful, and it wastes time and resources, but it is not always dangerous
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- Some people fake evidence and test results - for example, by putting a drop of blood into their urine sample. Blood in the urine can suggest a problem with the kidneys or urinary tract that would need more medical treatment.
- People have been known to deliberately infect a wound using saliva, or even to inject faeces into their bloodstream to cause fever or sepsis. This can be life threatening.

Other examples of what people do to get medical attention include:

- People who don’t have diabetes taking insulin (a drug used to treat diabetes) that they don’t need to make themselves ill
- Pretending to have Usher syndrome (a genetic disorder that causes deafness and blindness)
- Taking laxatives to give themselves diarrhoea
- Injecting egg into their bladder to make it seem as though they have too much protein in their urine, and
- Seeing several different doctors at different clinics to get as much attention as possible.

Munchausen syndrome

The most well-known factitious disorder is Munchausen syndrome. People with this condition often tell their doctor about mysterious illnesses picked up while travelling in exotic places.

They are often found to have sought medical help from many different hospitals, for different complaints, and to have left those hospitals against medical advice when it became clear that their symptoms were not genuine.

Some people with Munchausen syndrome have multiple scars from needless surgical procedures.

Factitious disorders and symptoms of mental-health problems

Factitious disorders are not always linked to physical conditions, and can involve faking symptoms of mental-health problems.

Symptoms and conditions that people are known to fake include depression, suicidal thoughts, and amnesia. People with factitious disorders often exaggerate their symptoms more when they are with a doctor, or when they are in a healthcare facility, such as a psychiatric ward or hospital.

What treatments are available?

Unfortunately, factitious orders are hard to treat, and many people don’t get treatment.

Before someone can be helped, they need to admit their problem. But people with a factitious disorder often refuse to admit that they are not telling the truth.
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There are many possible reasons for this. For example: they may feel such a strong urge to seek treatment that they can’t fully understand or accept the truth. So they keep seeking treatment, possibly from a different doctor or hospital.

A cautious, respectful approach

Directly confronting someone, and accusing them of being dishonest, is unlikely to help that person to accept their situation, and is likely to lead to an angry, negative reaction.

So, if a doctor suspects that someone is seeking treatment because of a factitious disorder, they should:

• Be clear that, although they suspect the person is not being truthful, they will get any treatment that is urgent: for example, even if a person is suspected of injuring or harming themselves, those injuries will still be treated
• Be clear that they are not judging the person
• Not suggest that the person may be punished for their actions
• Respect the person’s dignity, and
• Reassure the person that help is available.

The doctor should also:

• Pause any planned major treatments, such as medical procedures or surgery, and
• Consider stopping any medicines that the person has been prescribed for the symptoms they have reported, if they think that those medicines may harm the person.

When people accept treatment, various types of psychotherapy (‘talking treatments’) can be used to try and understand and change the person’s behaviour.

But it’s hard to know how well these treatments work because, sadly, so few people accept help. Many people simply go elsewhere to try to get treatment, and the problem continues.

If a doctor suspects that someone has injured or harmed someone else to get medical attention, it is likely that they will need to inform the police. If a doctor suspects someone of abusing a child, they should always inform the police.

What to expect in the future

If someone is able to admit to their condition and accept help, then there are treatments that may help.

But if someone doesn’t get help they could be at risk of serious harm. The more needless treatments, procedures, and operations someone has, the more likely they are to suffer harm and complications, infections, and even death.

People can also harm themselves by taking medicines that produce symptoms, and by taking medicines they don’t need for conditions they don’t have.
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There is also a chance that, once a person has a reputation for not being trustworthy, medical staff will doubt them when they have real symptoms.

If you've got concerns about someone you know who may be affected by a factitious disorder, you can ask your doctor about trying to get help.

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