



**Perinatal Mental Health  
and  
Fabricated and Induced Illness**

hosted by

**Dr Charlie Musters**

**Consultant Perinatal and Adult Psychiatrist**

# About me

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- **15 years in Newham**
- **NHS post**
- **60-70 medico-legal cases per year**



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  - **40% Children Act Proceedings**
  - **60% Clinical Negligence**



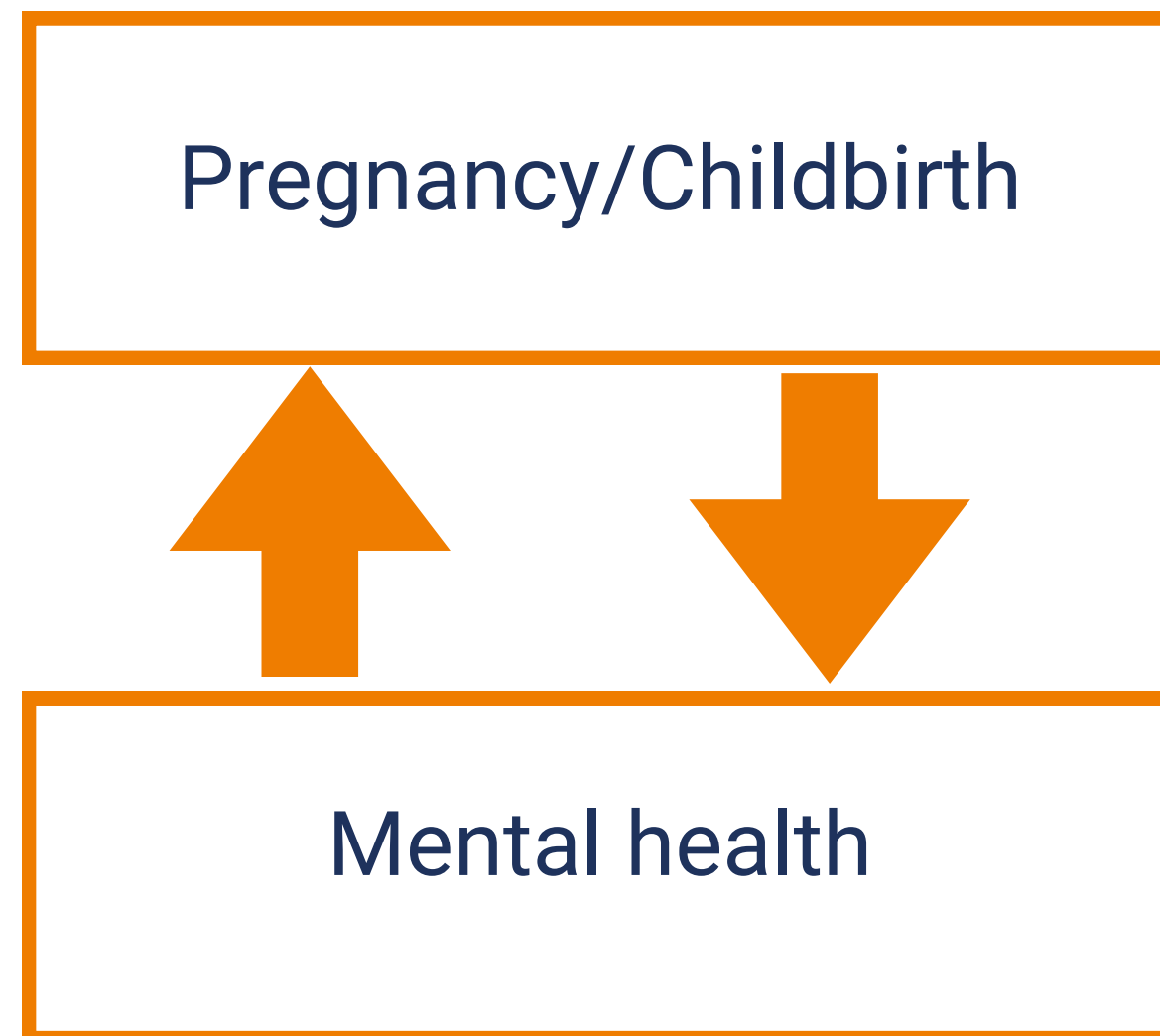
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    - **70% Obstetric negligence/birth trauma**
    - **30% Psychiatric breach of duty**



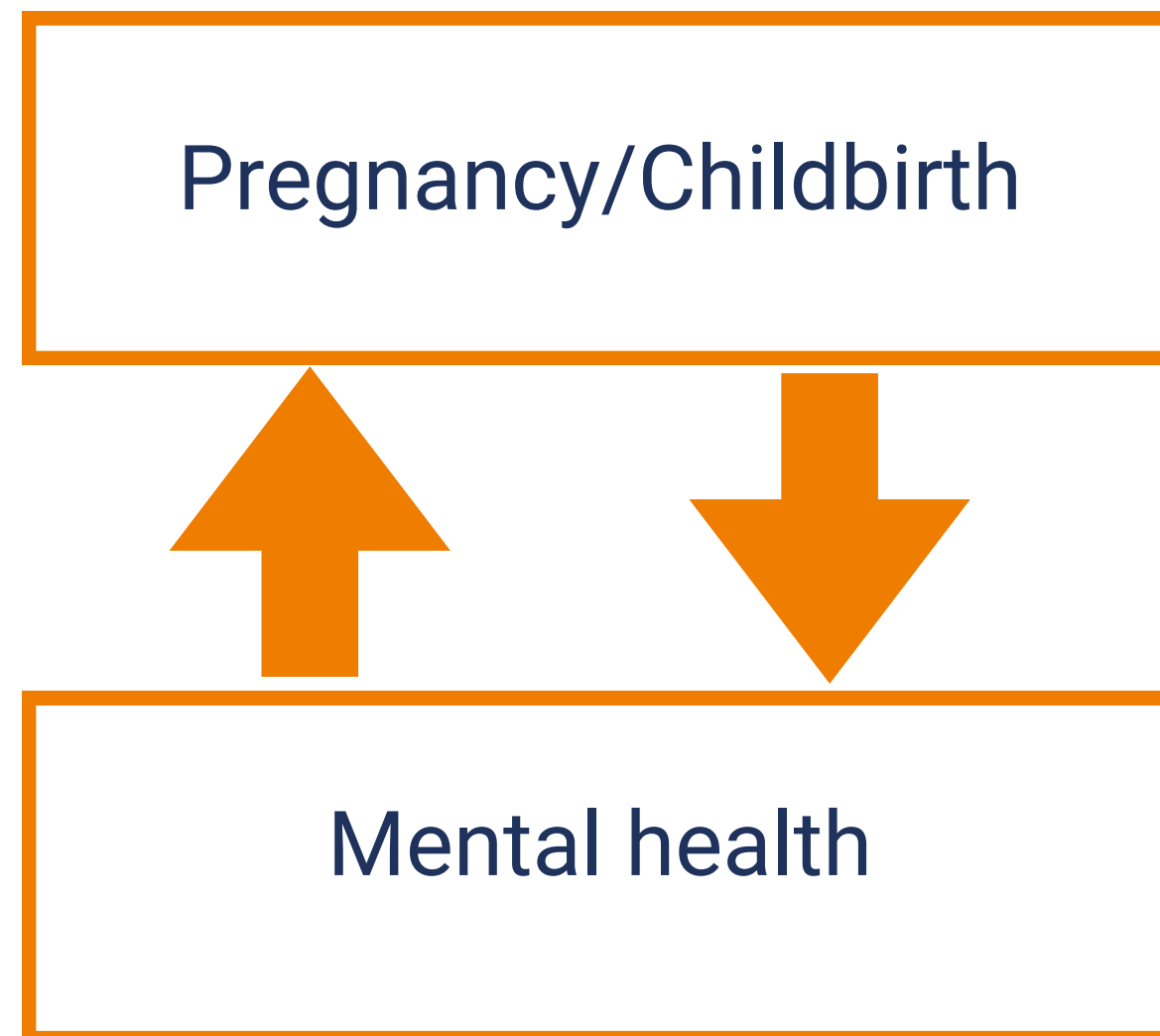
# Perinatal Mental Health

- **Mental healthcare for pregnant and postnatal women**



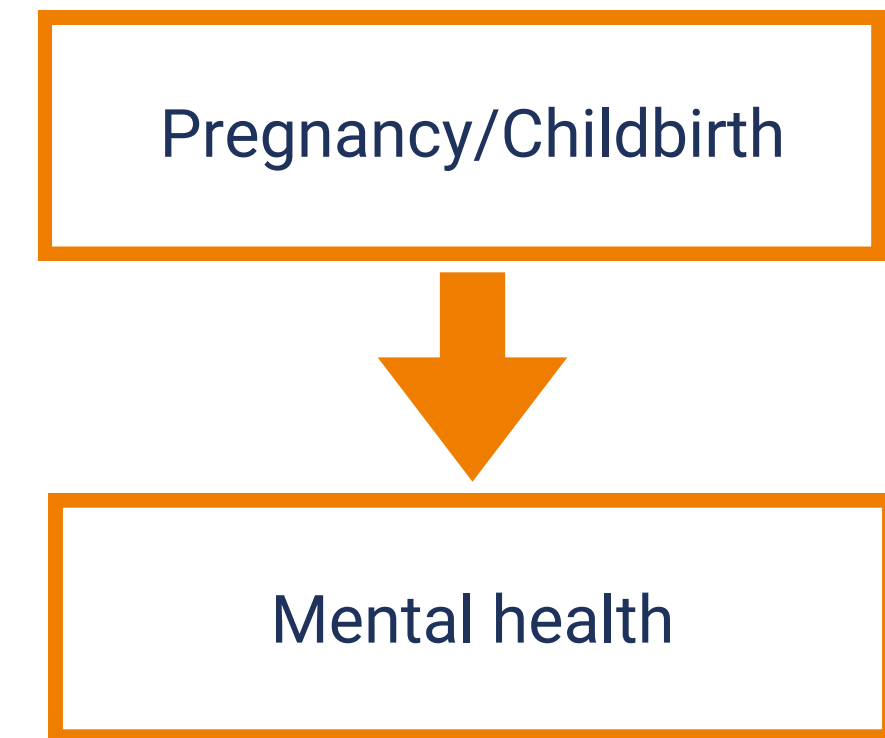
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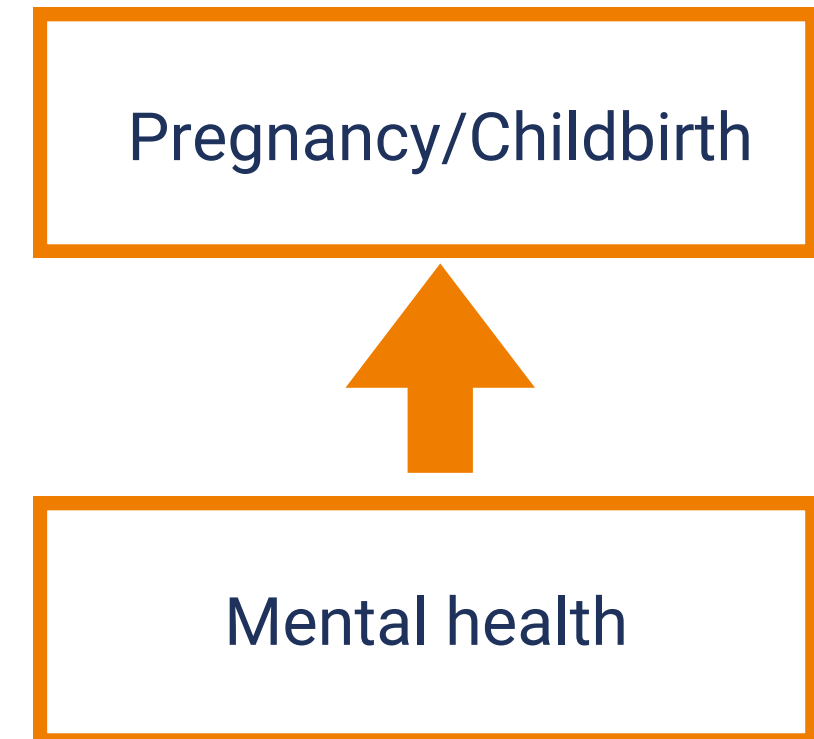
# Perinatal Mental Health

- **Medication changes**
- **Stress**
- **Delivery can trigger relapse**
- **Birth trauma / perinatal loss**



# Perinatal Mental Health

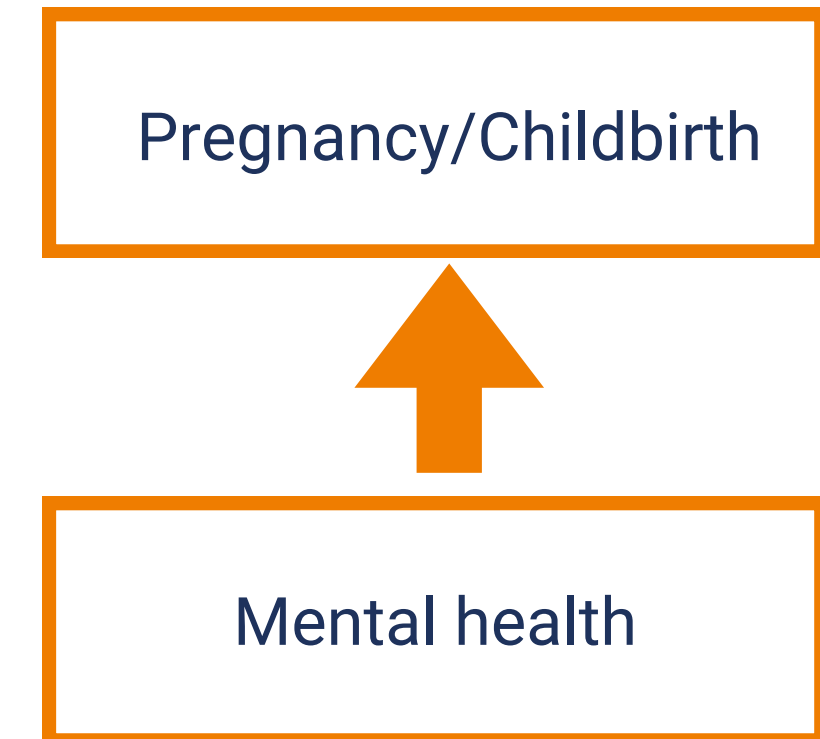
- **Unplanned pregnancies**





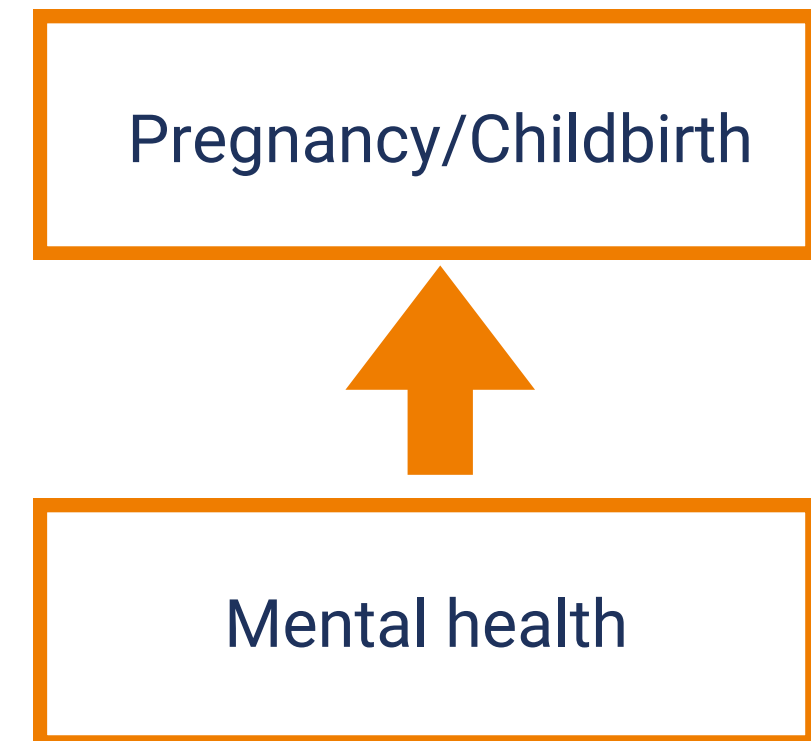
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- **Unplanned pregnancies**
- **Impaired parenting capacity**
  - **Positive symptoms**
  - **Negative symptoms**



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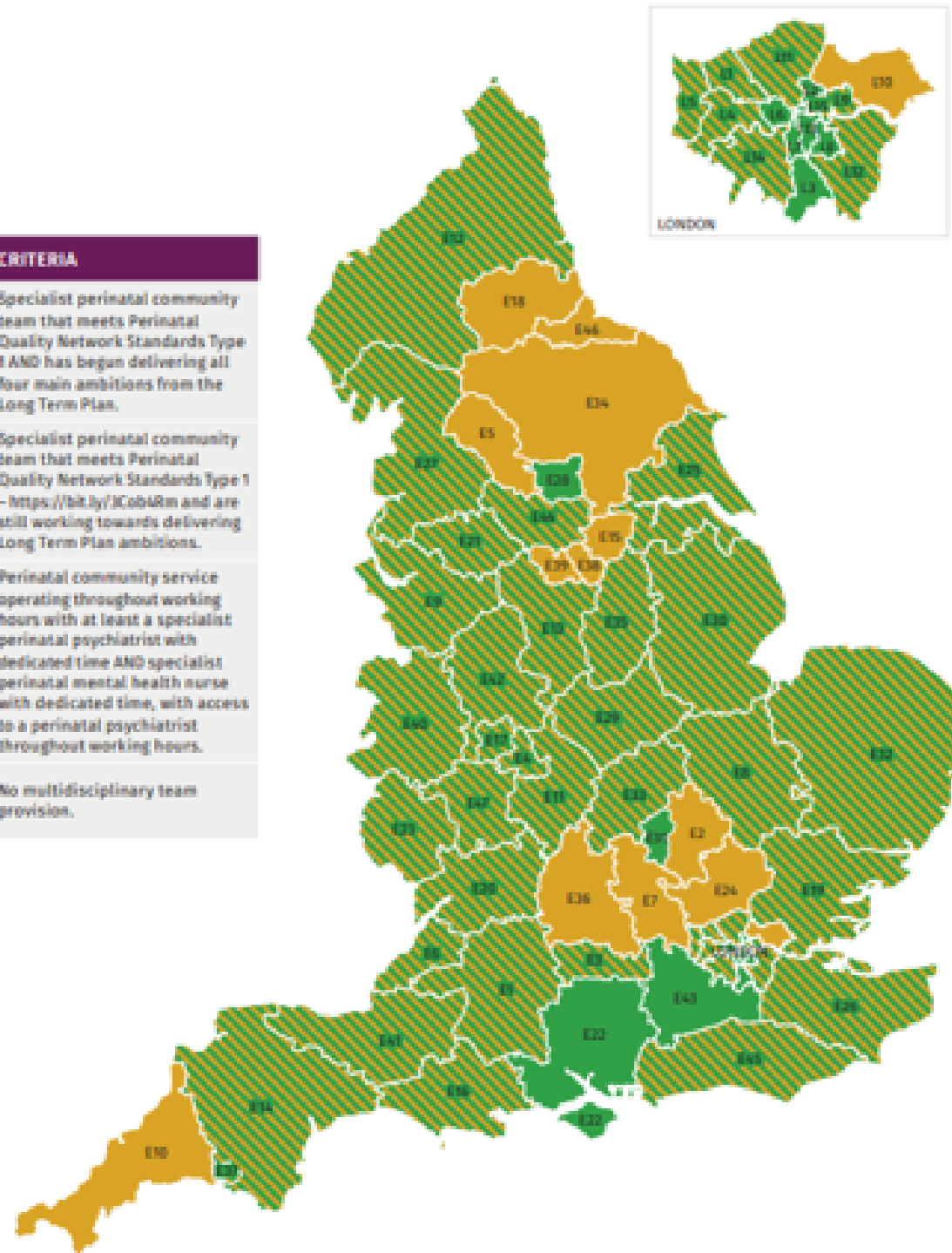
- **Unplanned pregnancies**
- **Impaired parenting capacity**
  - **Positive symptoms**
  - **Negative symptoms**
- **Lifestyle / social factors**
  - **Drugs and alcohol**
  - **Lower socio-economic status**
  - **Domestic abuse/vulnerability**
  - **Physical health problems**



## UK Specialist Perinatal Mental Health Community Teams

# England

LEVEL	CRITERIA
4	Specialist perinatal community team that meets Perinatal Quality Network Standards Type 1 AND has begun delivering all four main ambitions from the Long Term Plan.
3	Specialist perinatal community team that meets Perinatal Quality Network Standards Type 1 – <a href="https://bit.ly/3Cob4Rm">https://bit.ly/3Cob4Rm</a> and are still working towards delivering Long Term Plan ambitions.
2	Perinatal community service operating throughout working hours with at least a specialist perinatal psychiatrist with dedicated time AND specialist perinatal mental health nurse with dedicated time, with access to a perinatal psychiatrist throughout working hours.
1	No multidisciplinary team provision.



- 52,000 women in Q4 22/23
- £120m annual spend



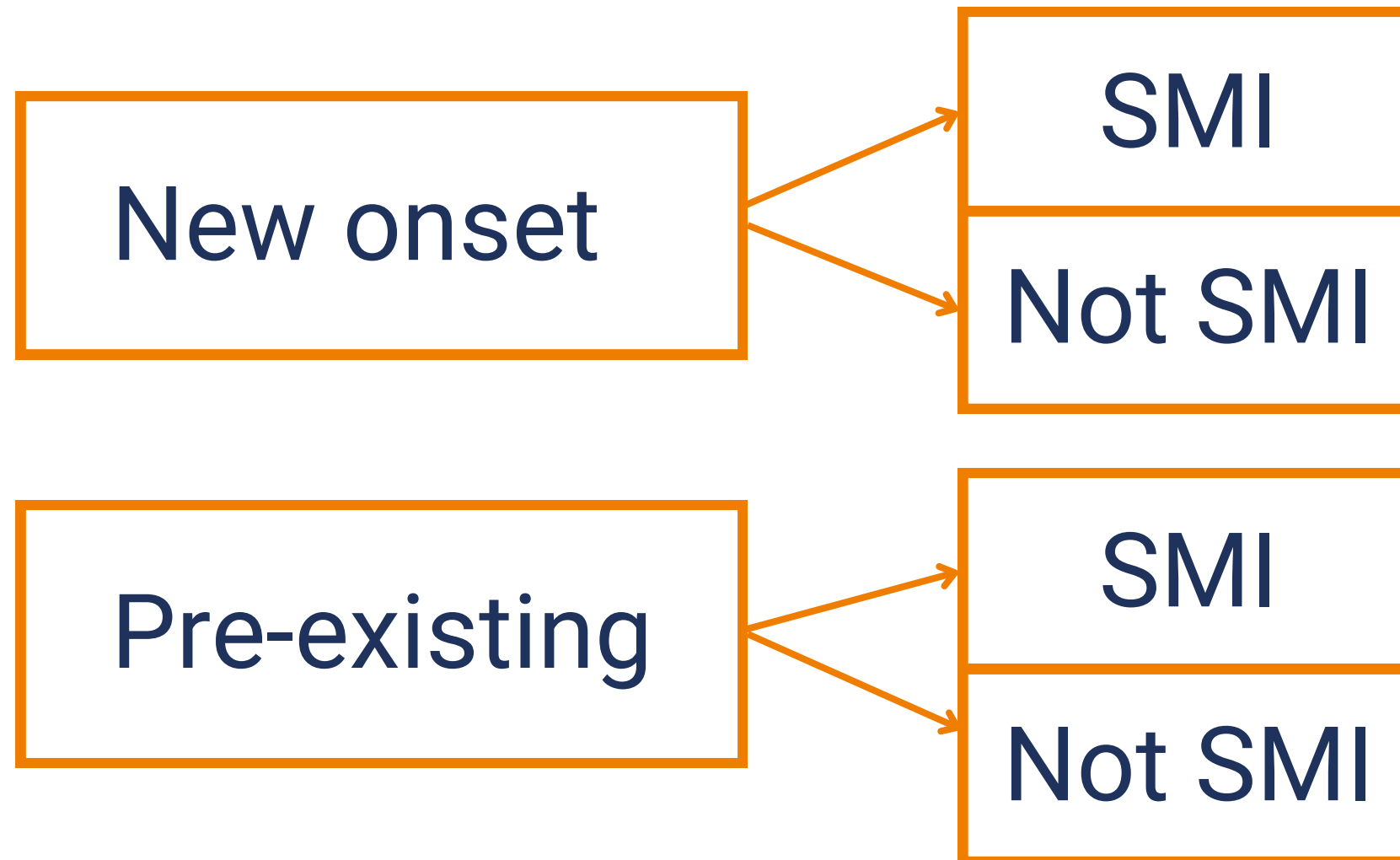
# Perinatal Mental Health

New onset

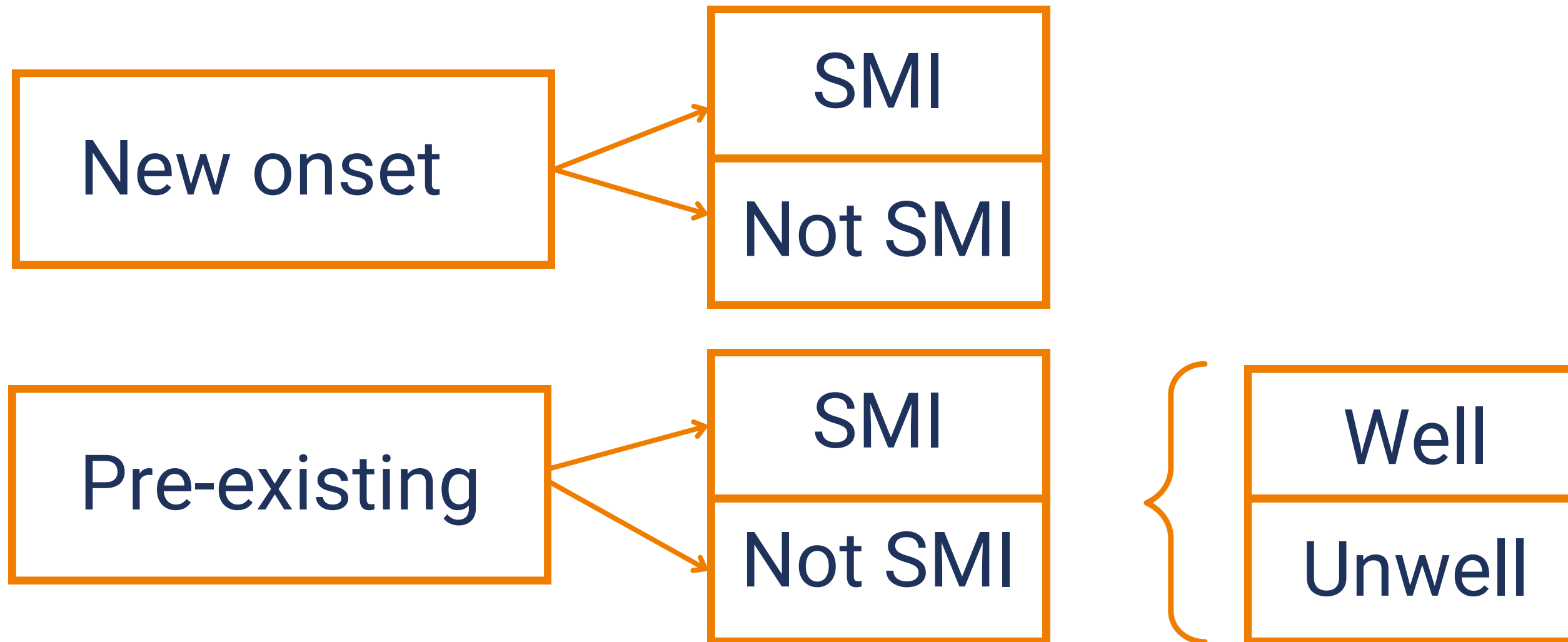
Pre-existing



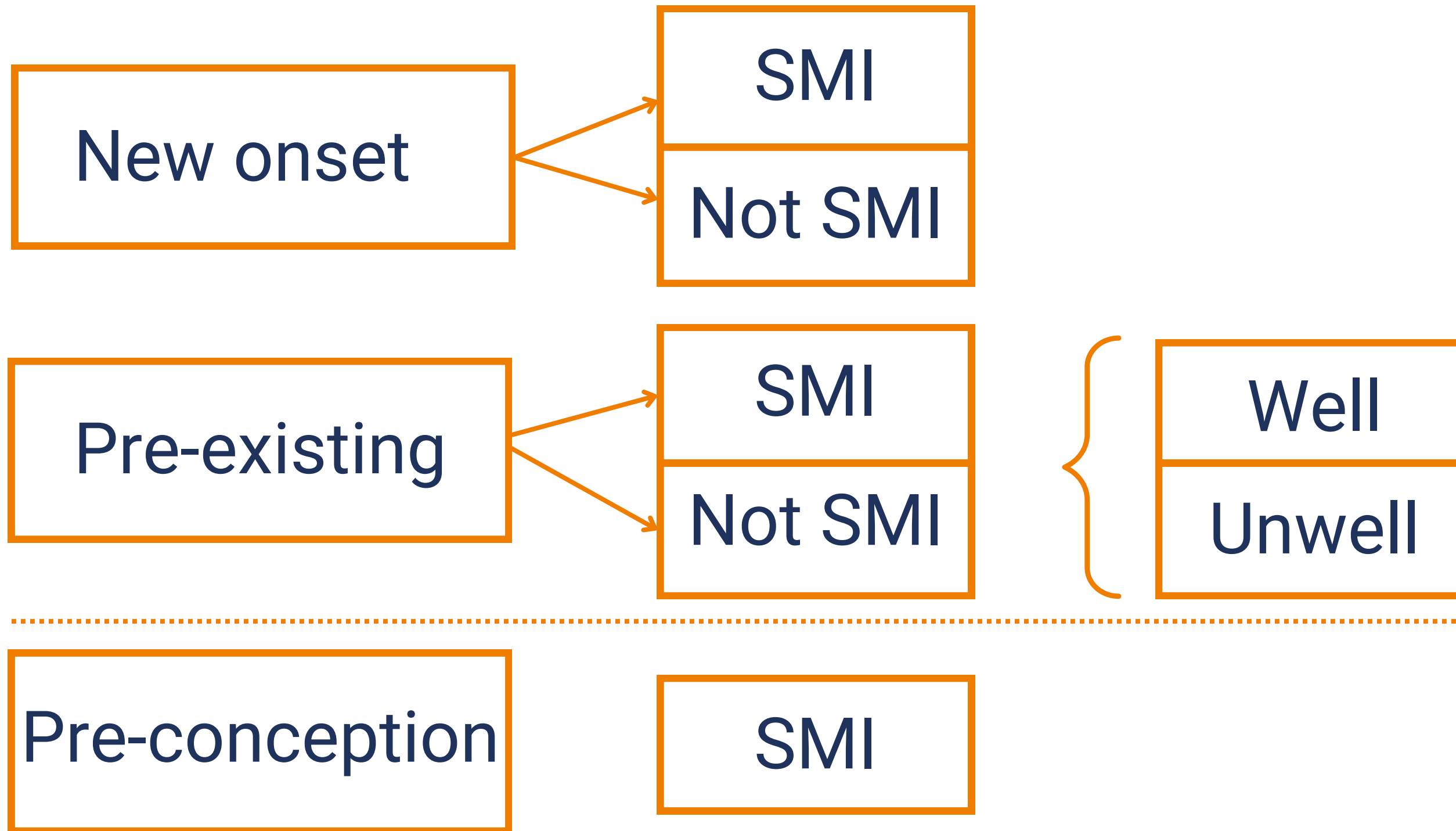
# Perinatal Mental Health



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  - **Bipolar affective disorder**
  - **Schizoaffective disorder**



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- } **Postpartum psychosis**



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- **Severe depression**
- **Bipolar affective disorder**
- **Schizoaffective disorder**

**Postpartum psychosis**



**c.50% relapse risk**



# Perinatal Mental Health

- **Rapid onset**
- **Fluctuating course**
- **Perplexity**
- **Can resemble delirium**
- **Assess very urgently**
- **Be very cautious!**



# Perinatal Mental Health

- **Maximum risk: early postnatal period**
- **From labour to c12 weeks post-birth**
- **Later relapses (and first onsets) also seen at:**
  - **Menstruation**
  - **End of breastfeeding**



# Perinatal Mental Health

- **Martin et al BMJ Open 2015**

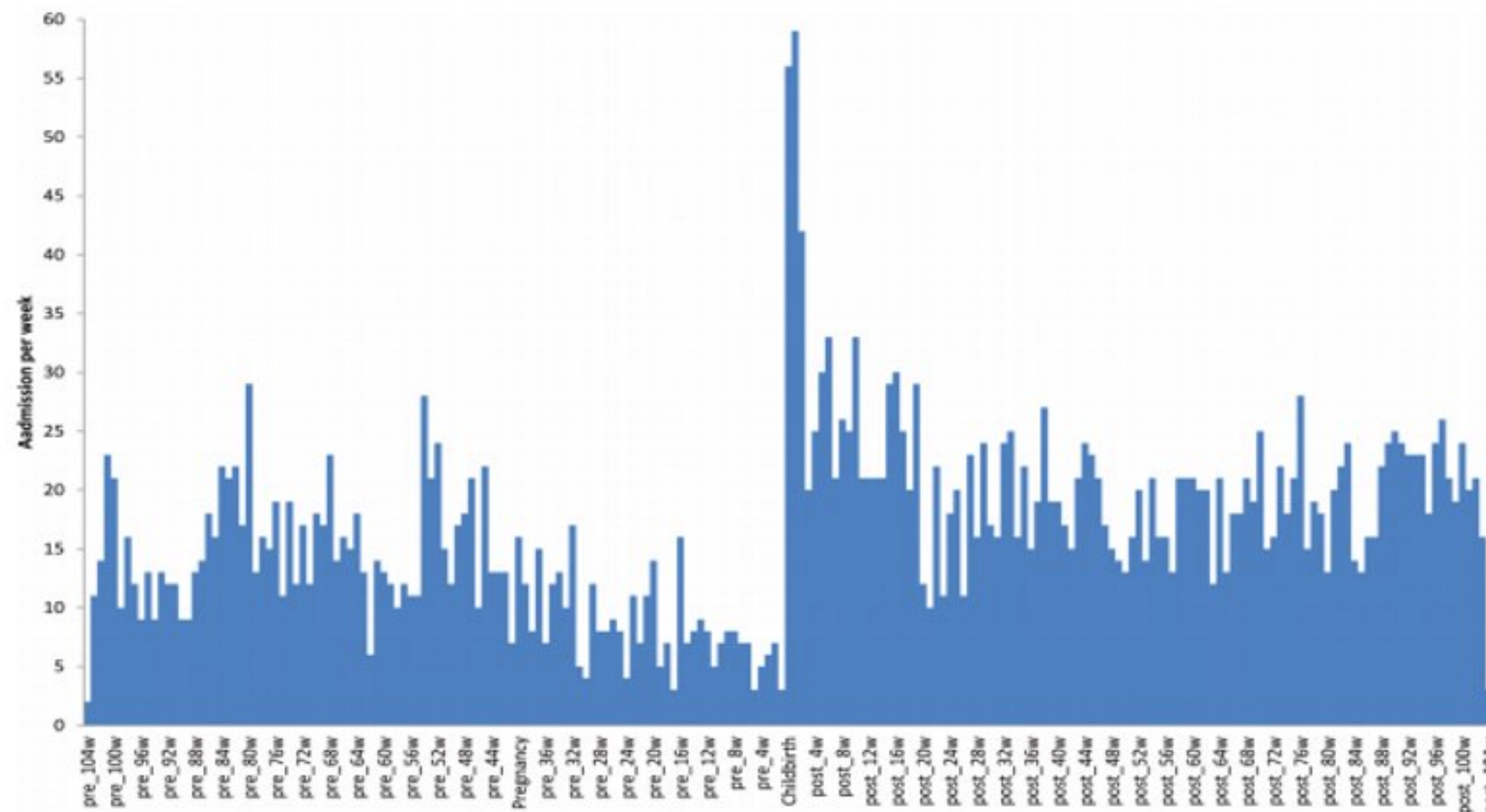


Figure 2 Admissions per week in relation to childbirth (all diagnoses).





# Perinatal Mental Health



# Perinatal Mental Health

- **Violent suicidal thoughts or acts**
- **Feeling incompetent, inadequate, estranged from baby**
- **After removal of baby**
- **PSYCHOSIS**



# Perinatal Mental Health

- **KEY THEMES:**
- **Lack of time-urgency**
- **Assessment and management by non-specialist teams**
- **Multiple handovers, multiple teams**



# Children's Act Cases

- **Parental mental illness**
    - **Diagnosis**
    - **Prognosis**
    - **Risk assessment**
    - **Parenting capacity**
- Remission**
- Relapse**



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# Clinical Negligence Cases

- **BIRTH TRAUMA**

- *Event:*
- **Loss of baby**
- **Lasting perineal complications**
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- **Lasting perineal complications**

- **Terrifying experience**

- *Psychiatric injury:*

- **PTSD (Primary vs secondary victim)**

- **Depression**

- **Sexual dysfunction**



# Clinical Negligence Cases

- **BIRTH TRAUMA**
- **What would non-negligent care have compromised?**





# Clinical Negligence Cases

- **MENTAL HEALTHCARE BREACHES**
  - **Usually suicide**
  - **Sometimes misdiagnosis**



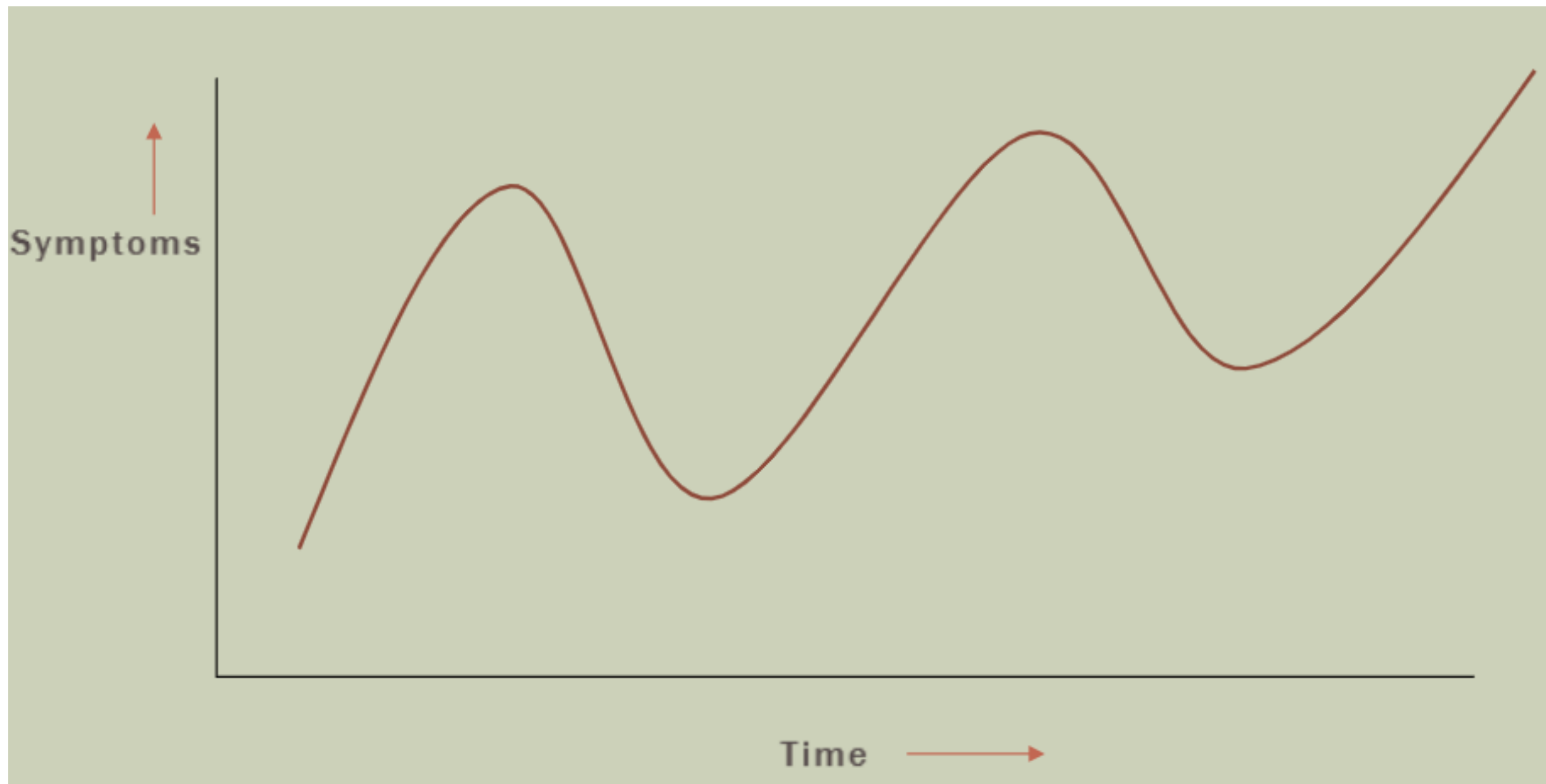
# Clinical Negligence Cases

- **MENTAL HEALTHCARE BREACHES**
  - **Usually suicide**
    - **Failure to see the patient**
    - **Failure to recognise evolving presentation**
    - **Failure to intervene**



# Clinical Negligence Cases

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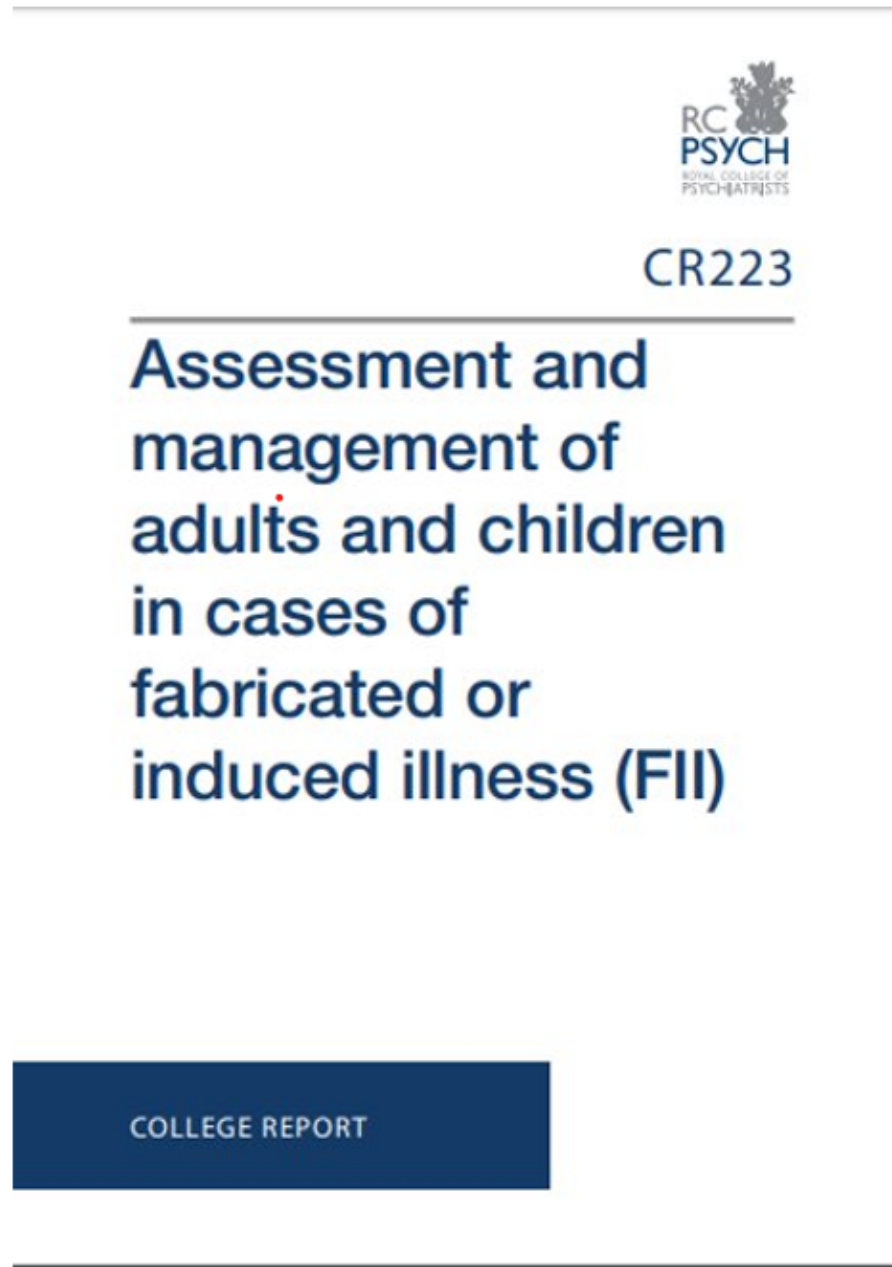


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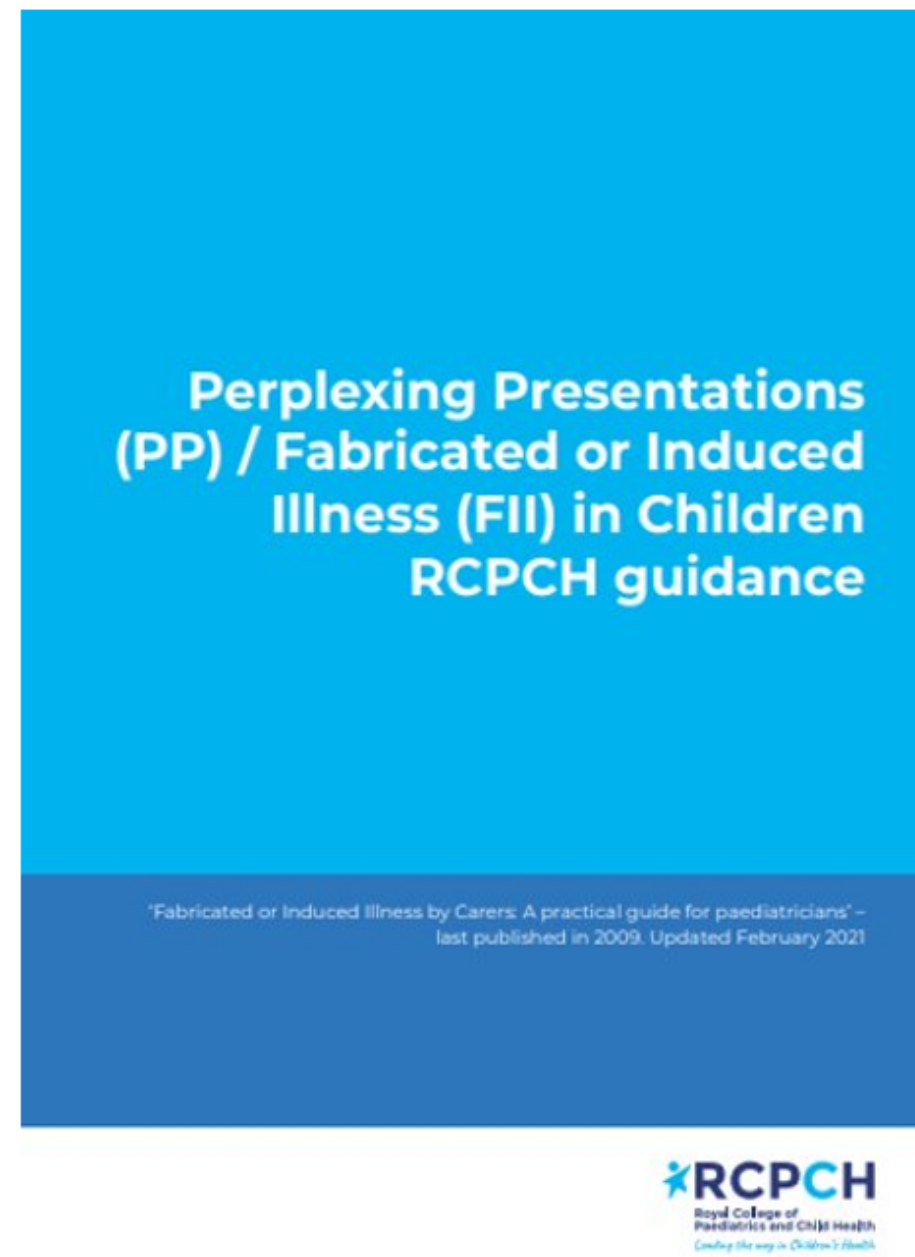
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- **...in order to make them appear unwell...**
- **...or more unwell...**
- **...such that healthcare is provided.**



# Fabricated and Induced Illness

## Woman jailed after harming child with laxatives in Aberdeen

**Tracy Menhinick, 52, wilfully ill-treated the boy with medication that affected his development**



📷 Tracy Menhinick was jailed for seven years. Photograph: Andrew Milligan/PA



# Fabricated and Induced Illness

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- **Injecting water from sink or fishtank down central line**



# Fabricated and Induced Illness

- **WHY?**
- **Very hard to know...**



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# Fabricated and Induced Illness

- **WHY?**
- **Very hard to know...**
- **Adept at deception**
- **Partial acceptance**
- **Perpetrators often lack psychological insight and vocabulary**



# Fabricated and Induced Illness

- **Profound lack of self-confidence**
- **“I am not enough to keep this child safe. They can only be safe in a hospital.”**





# Fabricated and Induced Illness

- **Erroneous beliefs:**
- **“I know my child better than they do, and I know my child is sick.”**
- **Often profound mistrust/denigration of professionals**
- **Somatisation and abnormal illness behaviour in perpetrator**



# Fabricated and Induced Illness

- **Profoundly disordered attachment:**
- **Separation/individuation between self and child**
- **What's done to the child is done to the parent**
- **Disordered relationship with professionals**
- **Systemic factors: usually the mother?**



# Fabricated and Induced Illness

- **Intolerance of the child's normal distress**
- **Distress is medicalised**
- **Can therefore be treated**



# Fabricated and Induced Illness

- **Enhanced self-esteem through expertise and sympathy**



# Fabricated and Induced Illness

- **Assessment:**
- **Not a diagnosis**
- **Professionals may suspect; facts are established in Court**



# Fabricated and Induced Illness

- **Assessment:**
- **Detailed assessment of patient's perspective**
- **Mental health with detailed timeline**
- **Careful assessment of the caregiver's past medical history**



# Fabricated and Induced Illness

- **Assessment:**
- **Mood, anxiety, psychosis (very rare), personality disorder**



# Fabricated and Induced Illness

- **Treatment:**
- **Very, very difficult to find a service:**
- **Often no clear psychiatric diagnosis**
- **Usually do not seem ill**
- **Rare to be assessed in NHS services with all available facts**





# Fabricated and Induced Illness

- **Treatment:**
- **Key factors:**
- **Do they accept what they did?**
- **Do they accept that their child is not ill?**
- **Do they accept that their actions harmed the child?**



# Fabricated and Induced Illness

- **Treatment:**
- **If available, and the parent agrees, it will be slow, with an uncertain prognosis**





**Thank you for joining!**

**Do you have any questions?**

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