

Pseudocyesis Leading to Folie-à-Deux

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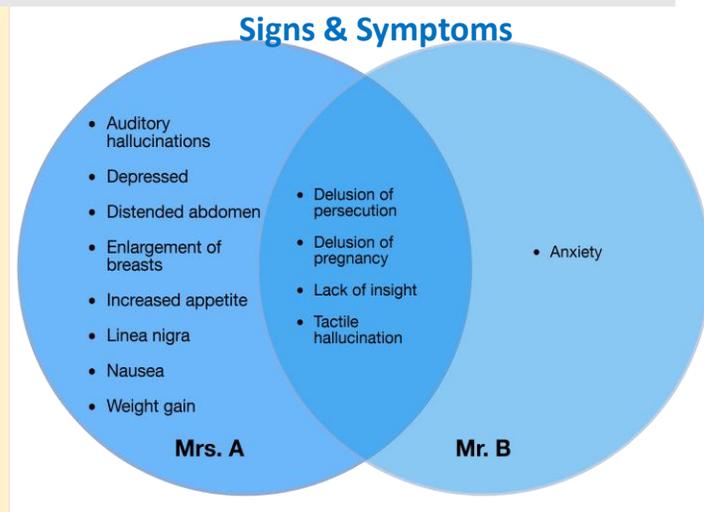
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Introduction

- Pseudocyesis or false belief of pregnancy is the manifestations of pregnancy symptoms in a nonpregnant woman.
- “Folie-à-deux”, also known as shared psychotic disorder, is a syndrome in which delusions are transferred from one individual to another.
- We describe a case of a married couple in which the female had delusional pregnancy, while the husband shared and supported her delusion against substantial medical evidence.

Methods

- A 37-year-old woman (Mrs. A) and her husband (Mr. B) presented repeatedly to a tertiary hospital claiming a 6-month pregnancy despite multiple negative pregnancy tests, undetectable β -hCG, and ultrasound evidence of an empty uterus.
- Detailed history revealed recurrent miscarriages, infertility-related stigma, and increasing social withdrawal over the past two years.
- Both were admitted to a psychiatric unit into different inpatient wards. Mrs. A received quetiapine while Mr. B received olanzapine and both received individual short term psychology support.



Results

- Separation led to early improvement in Mr. B, who gradually acknowledged the absence of pregnancy and became instrumental in challenging Mrs. A's beliefs during joint sessions.
- Mrs. A's improvement was slower, with resolution of auditory hallucinations, reduced sadness, and eventual abandonment of the pregnancy delusion by the third week.
- Both were discharged after three weeks with significant symptomatic relief.

Conclusion

- This case demonstrates the complex interplay between pseudocyesis and *folie-à-deux*, reinforced by infertility stress, cultural expectations and social isolation.
- The primary therapeutic intervention—separation of inducer and induced—was crucial, with pharmacotherapy and psychology sessions.
- Awareness of such presentations is important in psychiatric and gynecological settings, particularly in societies with strong pro-natalist pressures, to ensure timely diagnosis, avoid unnecessary medical interventions, and implement effective psychiatric management.