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I13 A Neurological Condition and Forensic Psychiatry: A Case Report

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Learning Overview: After attending this presentation, attendees will understand the concept of risk management with unconventional conditions. Attendees will also understand why clinical details are important, notably to make the proper diagnosis and offer solid evidence to the legal professionals.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by highlighting a rare case report. As this clinical situation is not widely described, it will allow forensic professionals to be more familiar with the diagnosis-making process and how this can be defended in a court setting.

Introduction: Typically, individuals found to be not criminally responsible on the account of a mental disorder integrate the Canadian forensic system, due to suffering from a schizophrenia or bipolar disorder. Mitigating the patients' risk and promoting their rehabilitation are the focus of the forensic psychiatry team. The difficulties in achieving significant positive results and allowing patients to be released and later discharged into the community result from treatment-resistant psychiatric symptoms. Although this is an unconventional situation, this may occur when someone presents with a psychotic disorder due to a medical condition. Indeed, this medical condition may not have a good response profile to the medication usually used in psychiatry that deals with delusions and behaviors. Moreover, the evolution of this condition, or its day-to-day management, may be quite different from what is usually expected from a common psychiatric condition.

Case Report: Based on a case report, this presentation highlights the difficulty in providing a diagnosis of psychotic disorder due to a neurological condition in the forensic context. For instance, this relates to a case of multiple sclerosis with psychotic features. In this case, ruling out differential diagnoses, primarily psychiatric, was not an easy task due to the presence of a comorbid personality disorder. In addition, as multiple sclerosis extremely rarely presents with psychosis as its main symptom, the diagnosis was not easy to make. Moreover, due to the presence of delusional thinking in relation to the cause for the brain lesions, adherence to treatment and follow-up was poor.

Discussion: When someone is deemed not criminally responsible on account of a mental disorder in the court, it states that the individual's mental disorder is associated with deviant behaviors. The role of the Review Board in Canada (forensic system) is to make dispositions that will mitigate the risk and enhance rehabilitation. Making the appropriate diagnosis is essential to offer the optimal treatment response and assess its efficacy, notably on the risk profile. It is notably relevant in forensic psychiatry because evidence gets scrutinized, not only at the initial hearing, but also during upcoming hearings through the Review Board system. Moreover, inappropriate medical management will lead to risk for the patient (due to the progression of the disease inadequately treated) and risk for the community (due to the ongoing risk of safety). This case also shows how difficult risk mitigation is achieved and how risk formulation is performed because of an unstable neurological disease. Moreover, in this particular situation, the impact of propaganda that in this particular occurrence was detrimental to the patient's rehabilitation by increasing the patient's paranoid symptoms will be presented.

Neurological Condition, Propaganda, Risk Management