

The Virtual World of medical child abuse: Using the Internet to create and dispel cases

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Learning Objectives:

- To illustrate the methods and manners in which the internet has enhanced cases and assisted in the investigations of cases of medical child abuse
- To deconstruct the process in which these complicated, controversial cases are investigated medically
- To highlight the power of the multidisciplinary team

A Rose by Any Other Name...

- Munchausen Syndrome by Proxy
- Factitious Disorder by Proxy
- Meadow's Syndrome
- Fictitious Illness by Proxy
- Pediatric Condition Falsification
- Fabricated Illness
- Medical Child Abuse (2009)
- Caregiver-Fabricated Illness in a Child (2013)

Medical Child Abuse (C. Jenny, 2009)

- Includes the fabrication, exaggeration or induction of symptoms resulting in the child receiving harmful or potentially harmful medical treatment at the instigation of the caregiver.

How Does This Happen?

- Medical Evaluations
- May indeed have a true medical ailment; other ailments are false
- Multiple doctors and specialists
- Defensive Medicine
- Fear/ insecurity/ doubt
- We believe what our patients and parents tell us!

The Facilitating Medical Environment

- Electronic Medical Record
- Barriers for Accessing Past Medical Information
- Increased Reliance Upon Tests to Support a Diagnosis
- Drive for Patient Satisfaction
- The Internet
- Increased Availability and Exposure to Specialists

Squires JE, Squires RH. Munchausen Syndrome by Proxy: Ongoing Clinical Challenges. *JPGN* 2010; 51(3): 248-253.

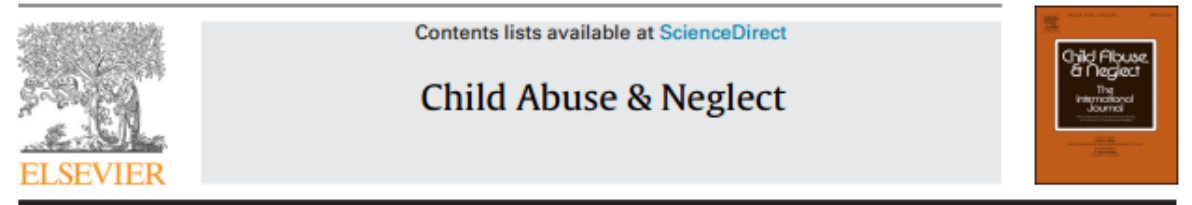
Munchausen by internet (Feldman, 1998)

- Creation of virtual support groups.
- Dramatic and often fatalistic stories of illness to online support groups and chat rooms.
- Attempts to gain attention and popularity

- 61% of perpetrators of fabricated illness in children : engaged in pathological lying in medical encounters and other aspects of their life. (Bass, Jones. 2011).

Common blog themes

- Distortion patterns
- Escalation patterns
- Attention patterns
- Exposure of the children to public viewing
- Attitudes toward medical providers
- Fundraising and charity



Care taker blogs in *caregiver fabricated illness in a child: A window on the caretaker's thinking?*[☆]



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ABSTRACT

Three recently diagnosed cases of caregiver-fabricated illness in a child at Seattle Children's Hospital shed light on a new manifestation of their caretakers' attention seeking. The patients' mothers were actively blogging about their children's reputed illnesses. Although

Distortion patterns

- Exaggeration and misrepresentation
- Normal test results are selectively not posted
- Medically excluded diseases are actually reported to be present
- Repeated blog posts of the quest for answers to child's illnesses.
- Tone: dramatized accounts

Escalation patterns

- “Bucket lists”
- Discussions about the impact of the child’s death on family and siblings.
- Content : concerning given that parents were clearly advised that their children were not dying.

Attention patterns

- “Followers”
- Directly rewarded with concern and support
- Primary focus: Mother’s own experiences as the caretaker of a sick child and interaction with the online audience.

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Exposure of the children to public viewing

- Blogs contained visual images of the children.
- Graphic images of medical interventions
- Concerns about exploitation

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Attitudes toward medical providers

- Tone: critical of child's medical providers.
- “Us-versus-Them” theme
- Frustrated by “incompetent” medical experts
- Blog about refusal to agree to requests from docs to limit diagnostic efforts or interventions.
- Self-describes as protective
- Positive reinforcement by followers' comments: praise for being good advocates.

Fundraising and charity

- Seeking support from “Wish” organizations
- Monetary donations.
- Family’s needs and hardships
- Sought Social Security disability benefits under false claims of illness
- Followers can link the child’s illness blog to their own blogs

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