



HOW TO DETECT MALINGERED MENTAL ILLNESS: A PRACTICAL PRIMER

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Learning Objectives

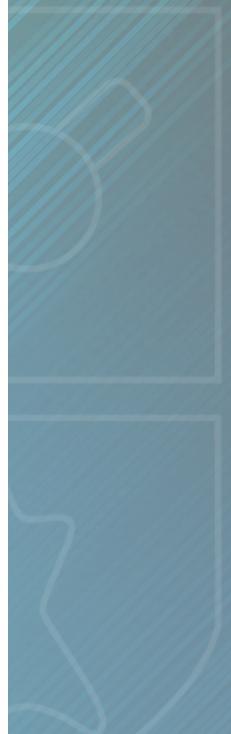
- Review the definitions of malingering and associated behaviors and conditions
- Highlight common malingering testing approaches
- Distinguish typical versus atypical symptoms in both depressive and psychotic disorders to detect malingering

Definitions

- *Malum*—bad or harmful
- Bad intent of offender's actions









Key Definitions

- Malingering (DSM-5):
 - “The intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives.”

Key Definitions

- Lying
 - Also involves intent to deceive
 - Difference is that not all lying involves false or grossly exaggerated presentation of symptoms for a **secondary gain**
 - Examples: psychopathy (e.g., “duping delight”), pseudologia fantastica

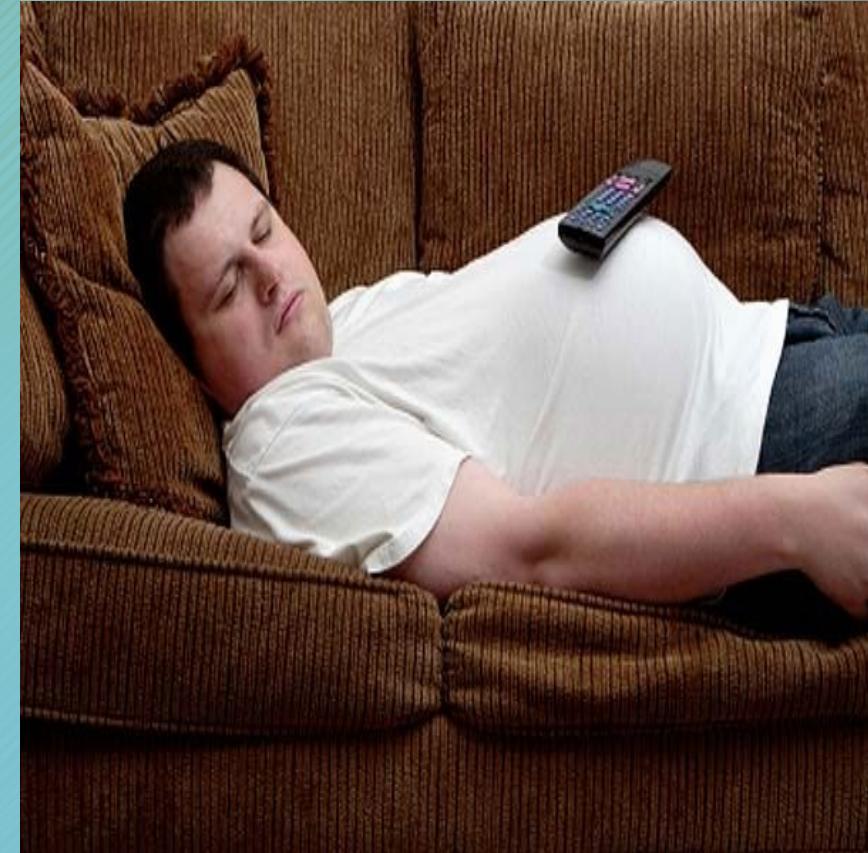


Key Definitions

- Feigning:
 - The deliberate fabrication or exaggeration of psychological or physical symptoms without any assumptions about its goals

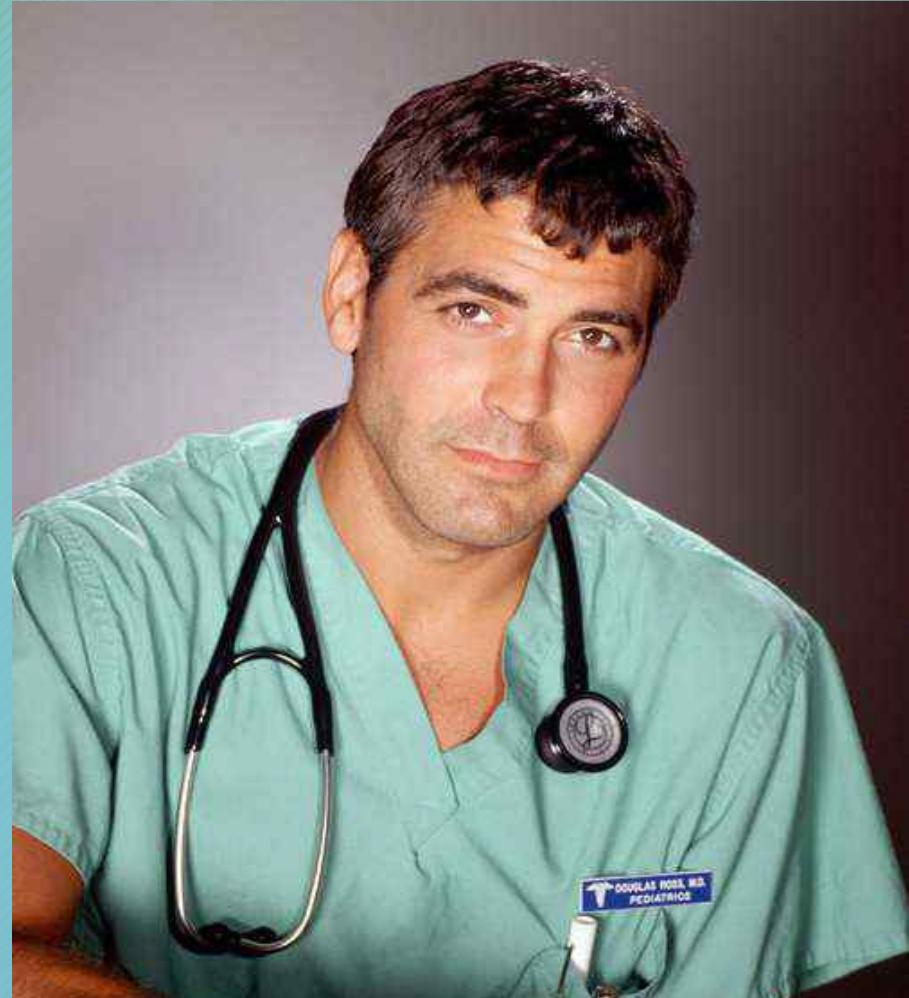
Key Definitions

- Suspect effort:
 - Effort test performance that suggests best effort not applied



Factitious Disorder

- Voluntary production of symptoms
- Assume “patient role”
- No other obvious secondary gain



Ganser's Syndrome

- Approximate answers

$$2+2=5$$



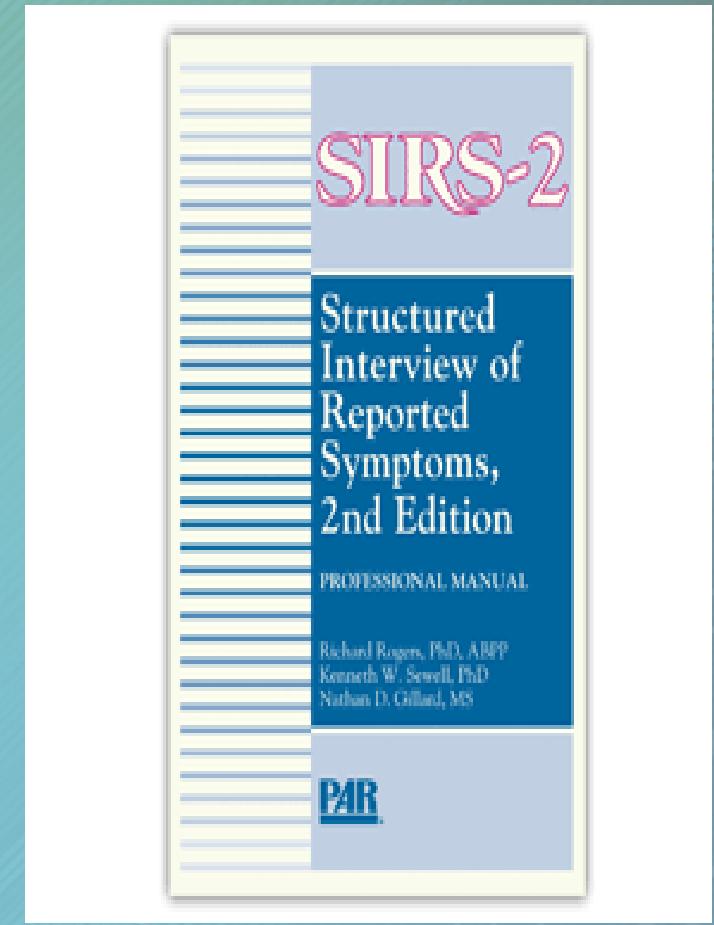
Prevalence

- 20% strongly or definitely suspected in psychiatric emergency room
- Between 25–30% of disability claims



Prevalence

- In jail study, 66% of those referred were malingering on SIRS



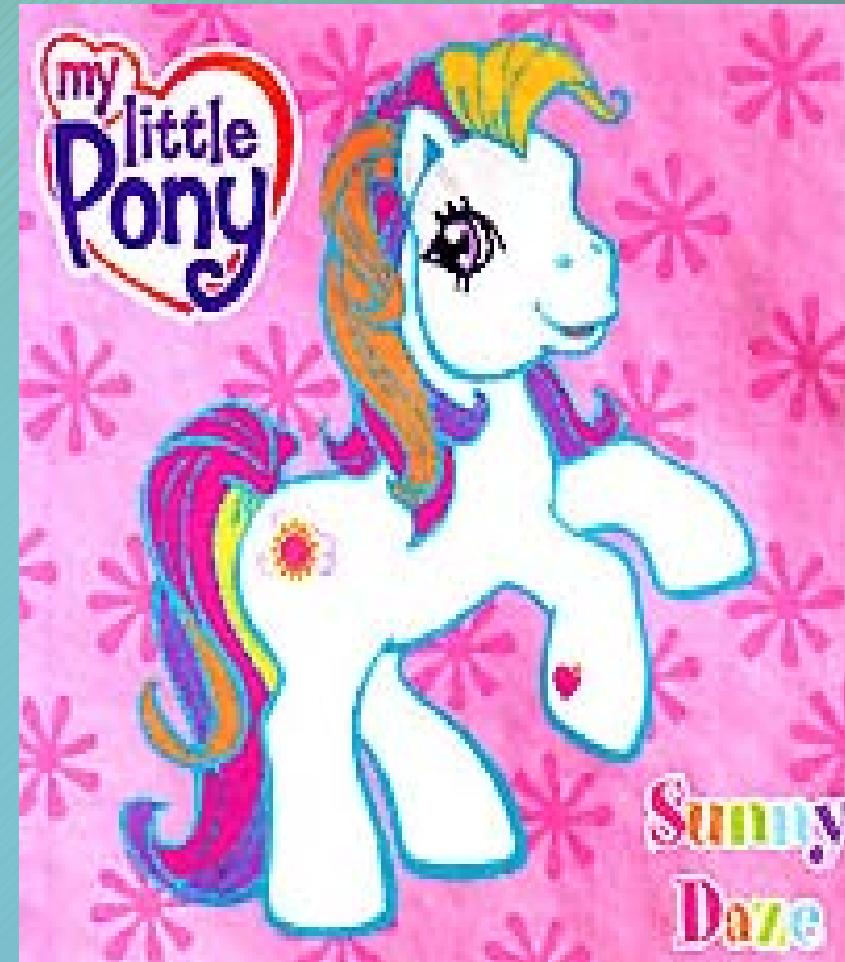
General Issues in Malingering Detection

- Understand real symptoms



Detection Strategies

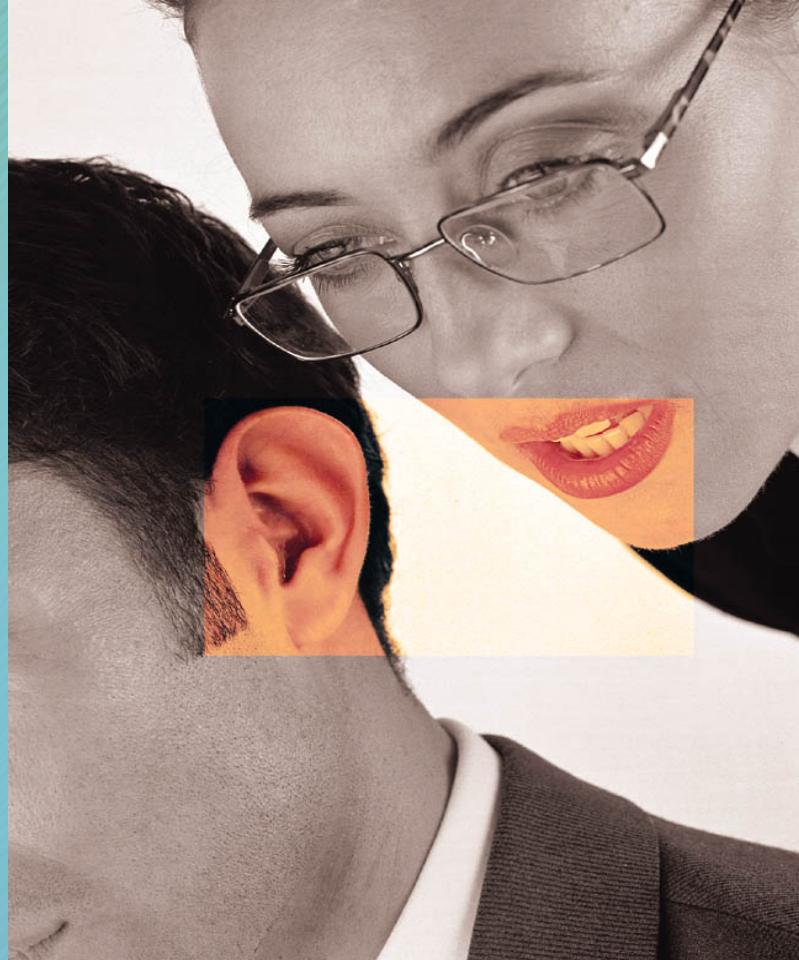
- Rare symptoms
- Improbable symptoms
- Rare symptom combination





Detection Strategies

- Symptom severity
- Indiscriminate symptom endorsement
- Obvious vs. subtle
- Reported vs. observed



Inconsistencies



- Person's report
- Reported vs. observed symptoms
- Inconsistent observed symptoms

Testing Strategies



Strategy #1

The Floor Effect







The Floor Effect

- **Asks very simple items:**

- What is the very first letter of the alphabet?
- Who is the president of the United States?
- What is $2+2$?
- What is next in sequence? A, B, _____

The Floor Effect

- Easy autobiographical information



Floor Effect Tests

- Objectively easy but may not appear to be
- Severe cognitive impairment defines lower boundaries of credible performance
- Vary in content, format, degree of difficulty, and transparency

Rey Memory Test

- 15 simple items
- Show for 10 seconds
- Emphasize that there are **15 *different*** items to recall!

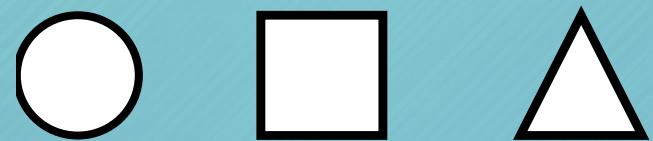


Rey 15-Item

A B C

1 2 3

a b c



I II III

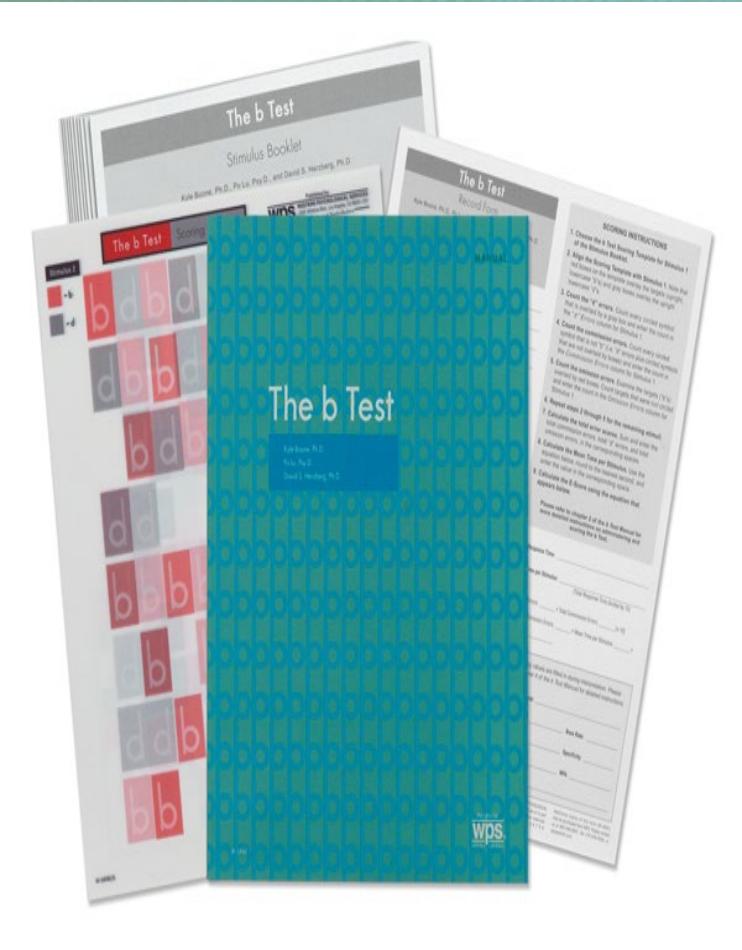


Rey 15-Item

- **Concerns:**

- No single cut off scores (10 vs. 9 vs. 8?)
- Lack of consistent administration guidelines
- Item recall is partly function of intelligence
- Genuine memory disorders may affect performance

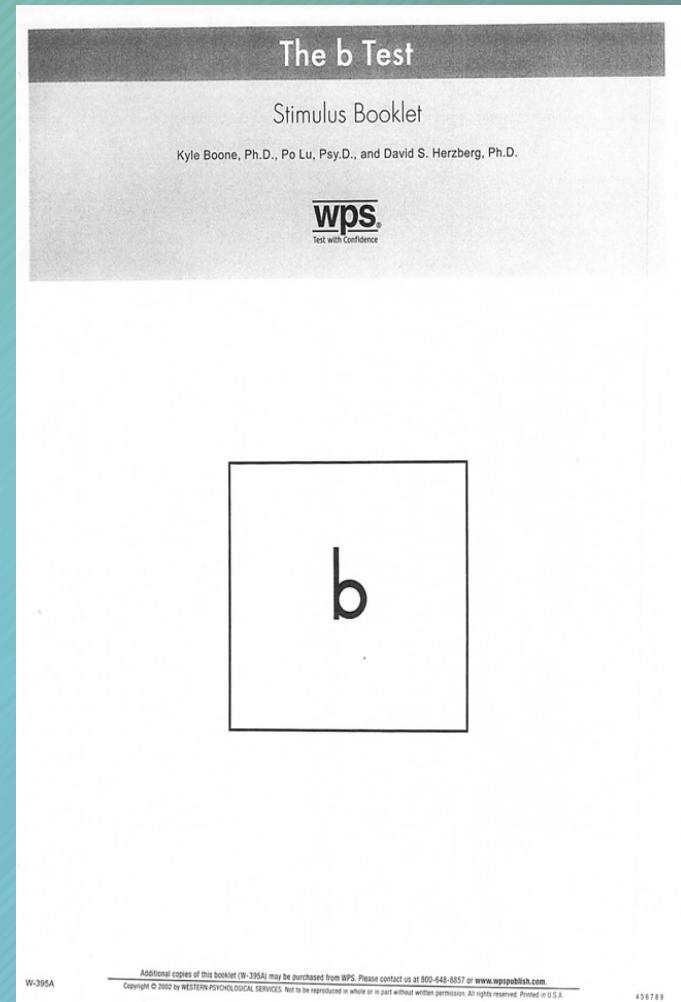
The “b” Test



- Used to assess suspect effort in a variety of claims:
 - Impaired memory
 - Problems with attention, focusing, or concentration

The “b” Test

- Letter recognition test
- Used in age 17 or older
- 15-page stimulus book with the letter “b” interspersed with other letters
- Circle “b” working as rapidly as possible



The “b” Test

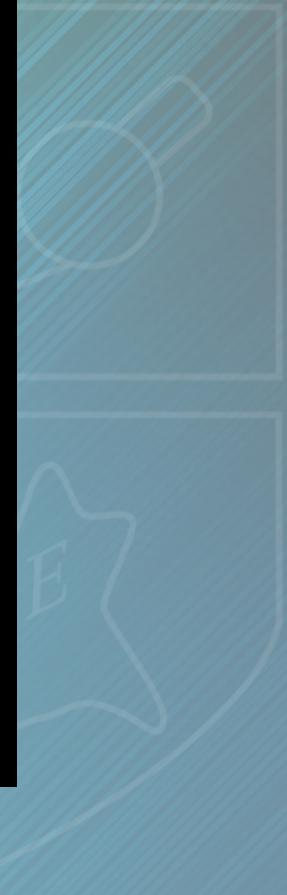
- Errors are totaled
- **“E-Index” score** given to measure test taking effort
- Total time required typically 15 minutes

Strategy #2

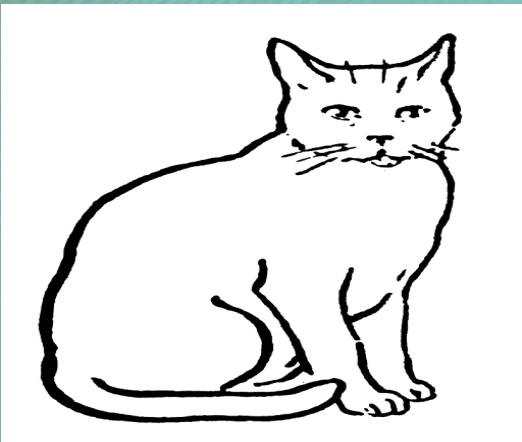
Symptom Validity Testing



Symptom Validity Testing



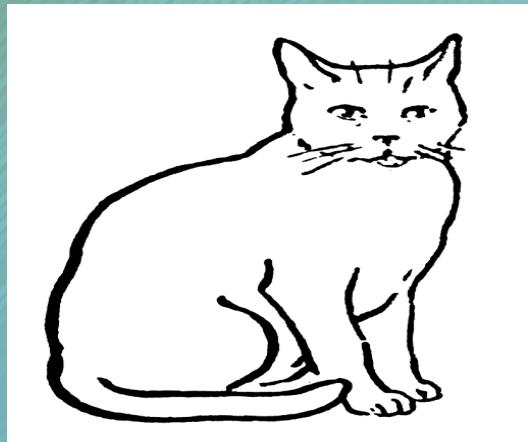
CAT



123

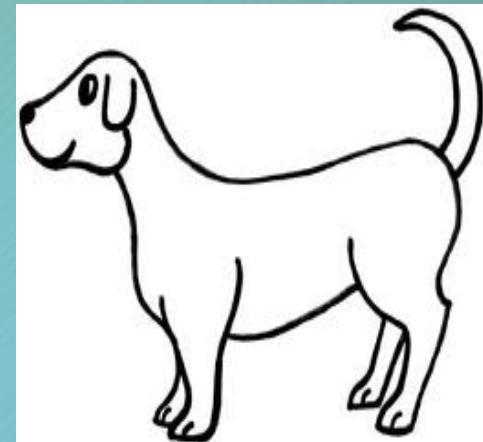


CAT



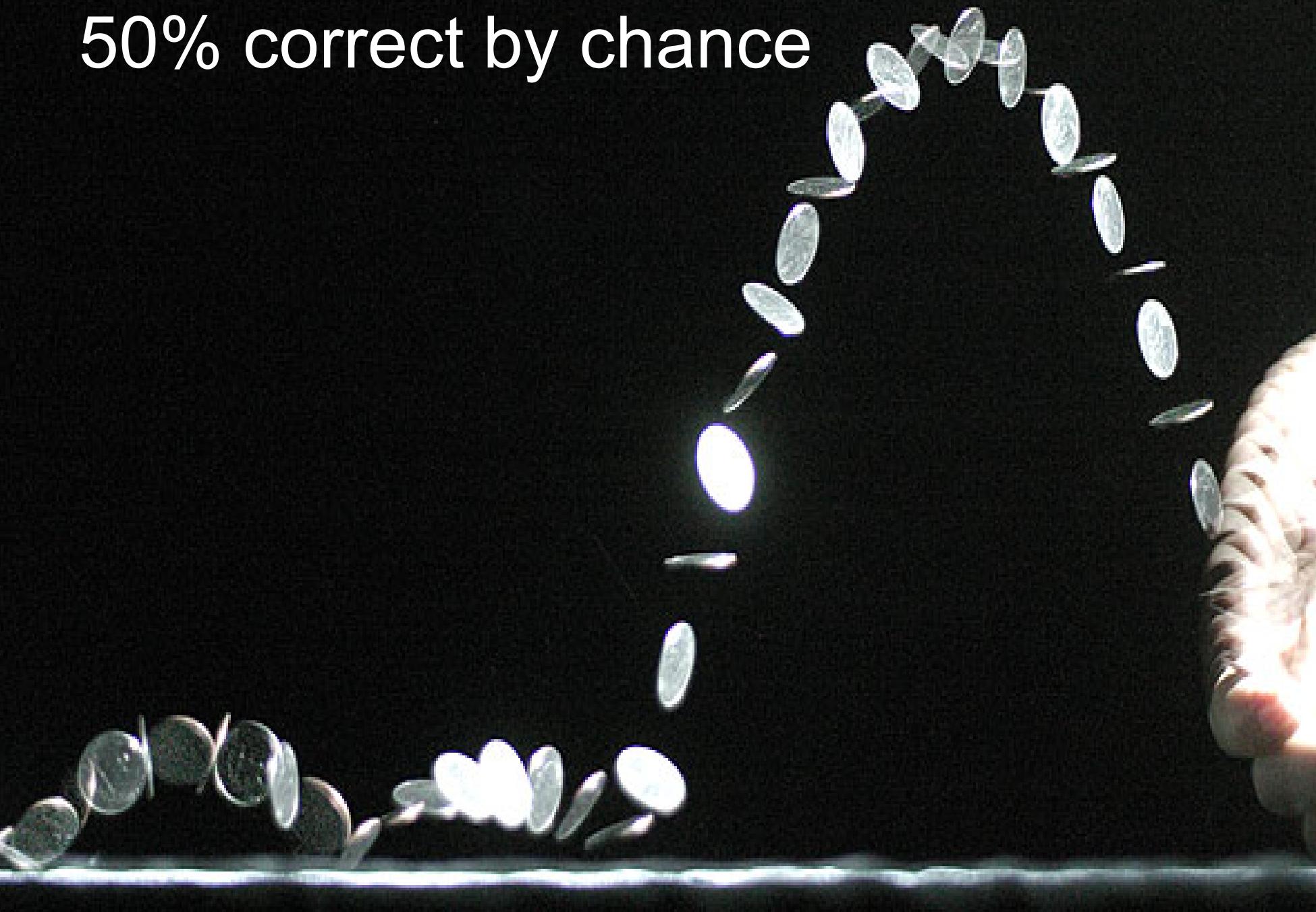
123

DOG



456

50% correct by chance



Symptom Validity Testing

- Probability of success based on random responding (generally .50)
- Statistics can calculate more specific probabilities
- Use of multiple SVTs more likely to detect below chance results

Symptom Validity Testing

- Evidentiary **gold standard** for malingered memory loss



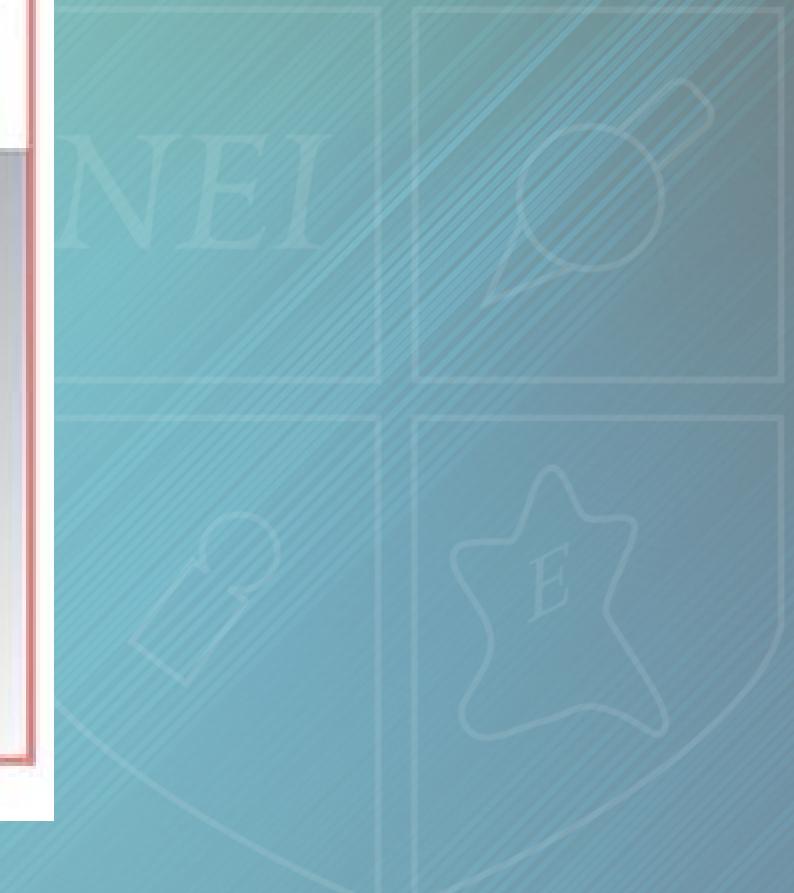
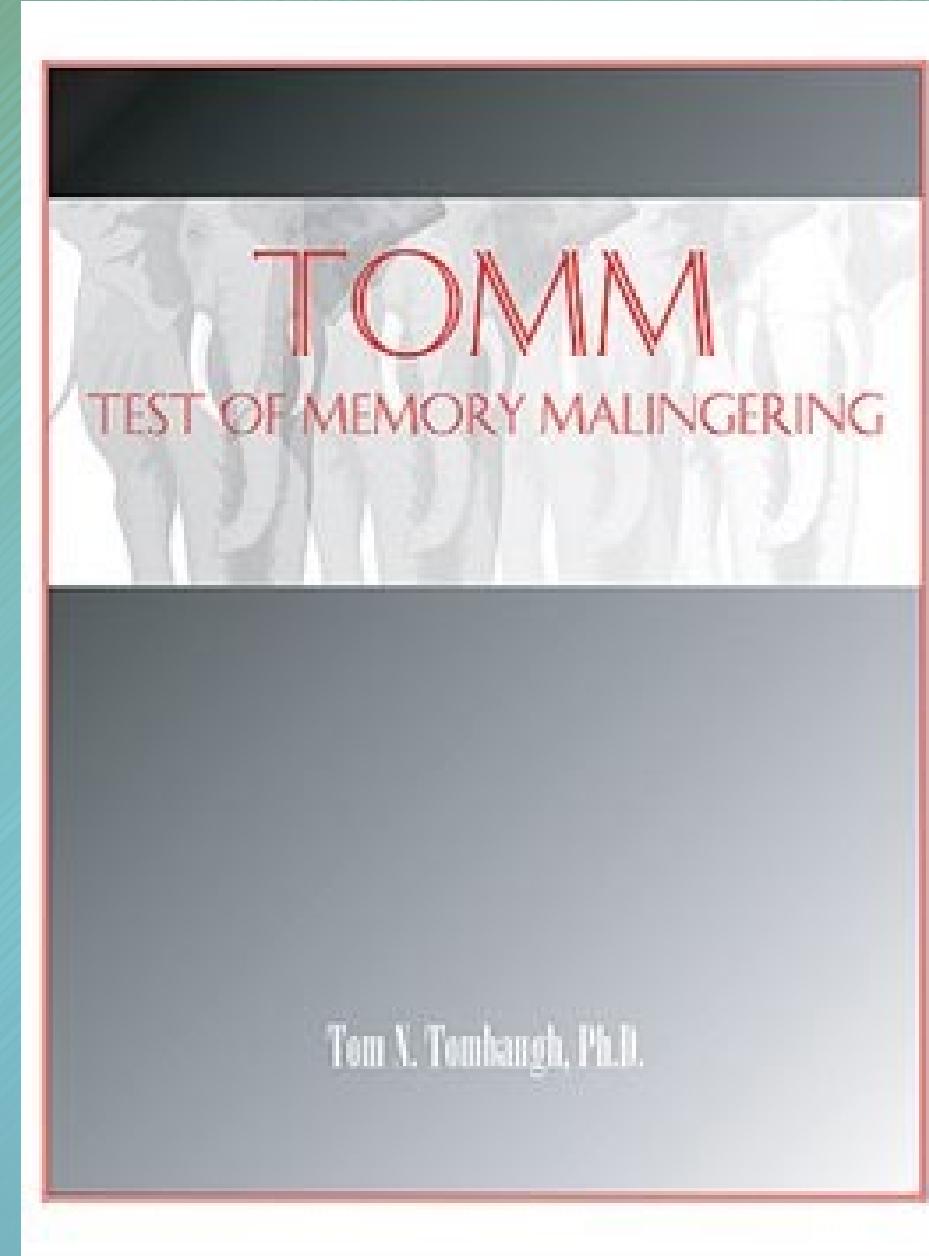
Must Provide Feedback



“Coin in the Hand”



- Coin in one hand of tester
- Examinee counts backward from 10
- Which hand holds coin?
- Genuine patients correctly identify hand with coin
- Malingers at chance



TOMM

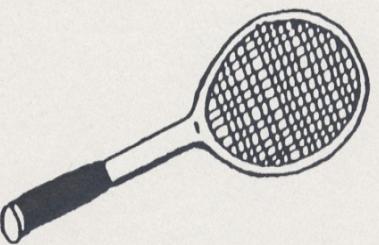
- 50-item **visual recognition** test
- Used in adults
- Involves two learning trials and a retention trial



TOMM Administration

- “Let’s try a sample trial first that contains only two pictures. Look carefully at each picture and try to remember it. You don’t have to learn the name of each picture. Just look at each one and try to remember it.”

(19)



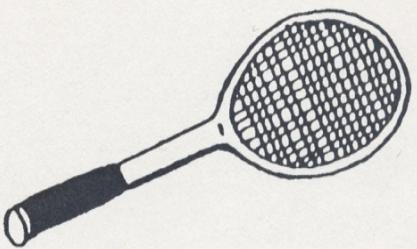
NEI

E



3 seconds per picture

***1 second interval
between picture***



A



B



Morel Emotional Numbing Test

- Assesses affect recognition
- Two faces presented to test taker
- Must choose one with assigned affect
- “Some individuals with PTSD may have difficulty recognizing facial expressions.”

Which face is happy?





Strategy #3

Unusual Pattern of Responses Test

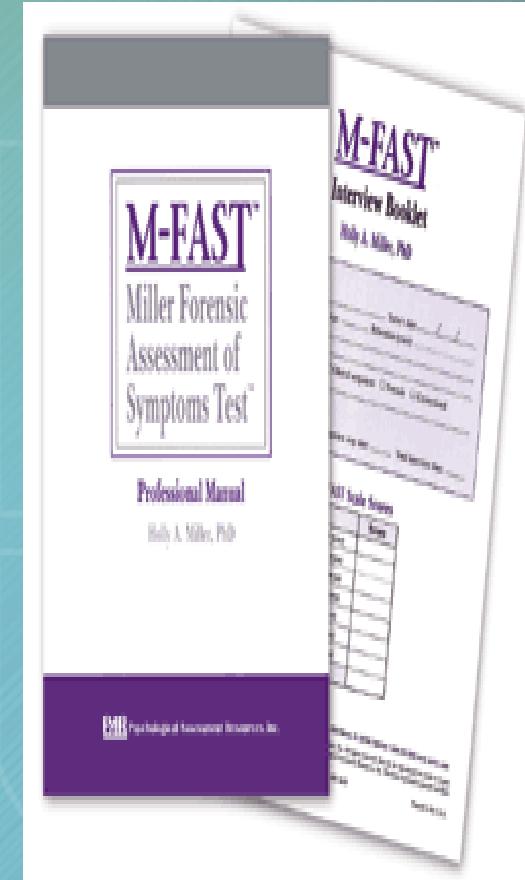
Unusual Pattern of Responses Tests

- Examines if evaluatee is providing atypical responses:
 - Rare symptoms
 - Unusual combination of symptoms
 - Absurd symptoms
 - Inconsistent symptoms



Miller Forensic Assessment of Symptoms Test (M-FAST)

- Screening instrument
- 25 items
- 5-minute administration
- Score of 6 indicates likely need for further testing



Structured Inventory of Malingered Symptomatology

- 75 item true/false self-report
- Screening tool for malingering
- Has five subscales
- >14 possible malingering



Structured Interview of Reported Symptoms (SIRS-2)

- Most widely used tool to assess feigned symptoms
- 172 items
- Takes 30–45 minutes to administer
- Considered “gold standard” evaluation tool

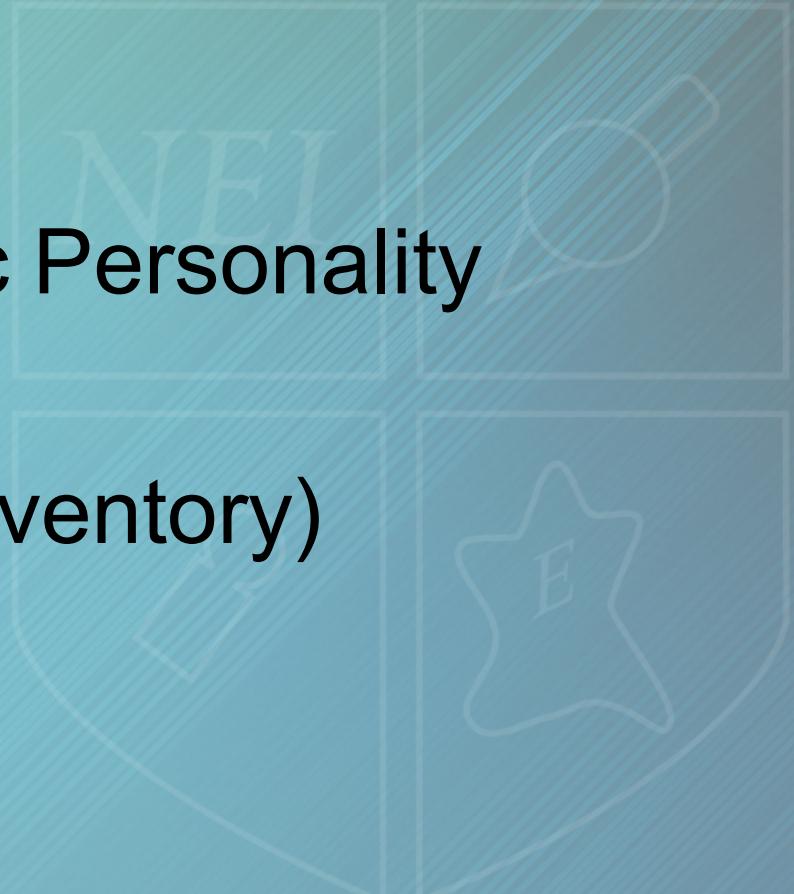


Strategy #4

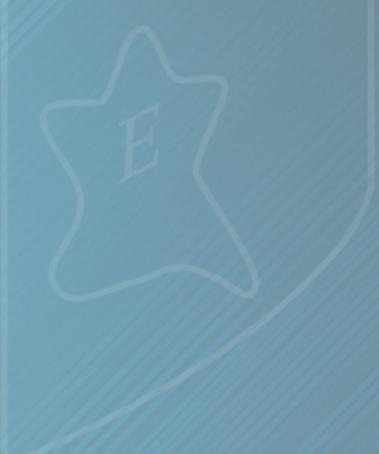
Self-report tests of psychological functioning

Self-Report Tests

- Self-report tests with embedded validity scales
- Common tests include:
 - MMPI-2 (Minnesota Multiphasic Personality Inventory-2)
 - PAI (Personality Assessment Inventory)



Malingered Depression



Malingered Depression

- Gervais et al (2001):
 - Between **25–30%** of patients who claimed major depression in civil litigation were probably malingering based on forced choice tests

VIGNETTE

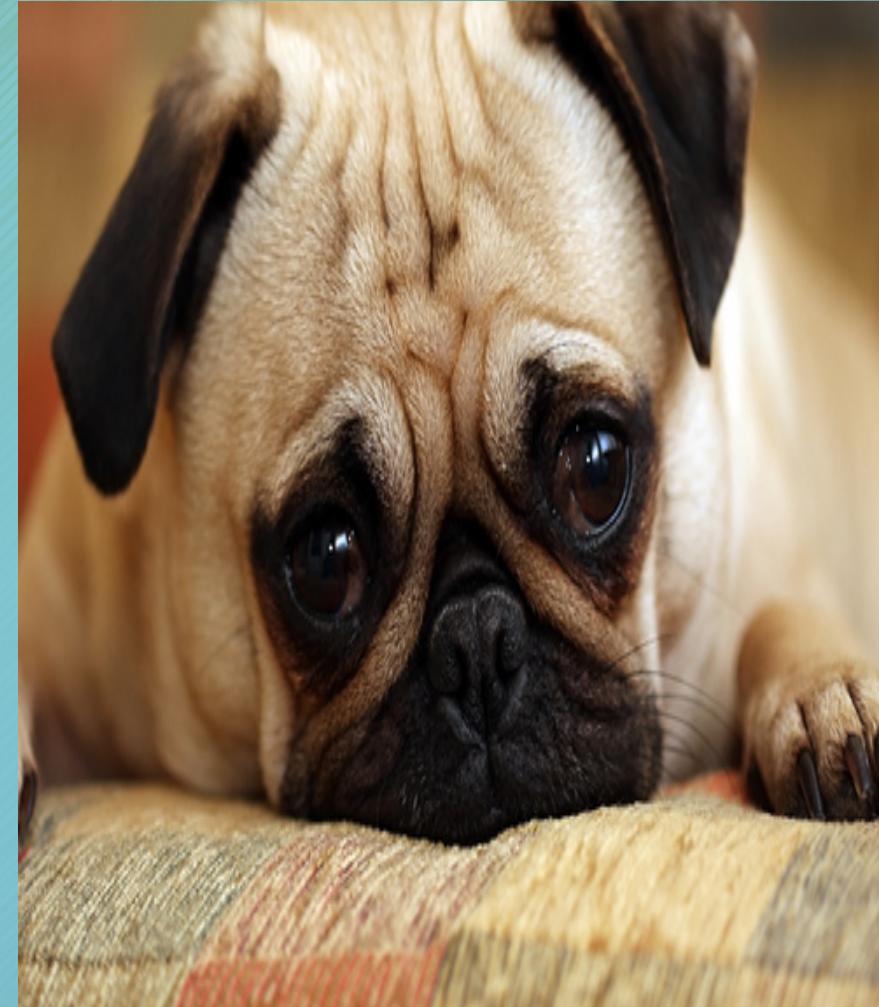
You are asked to evaluate a defendant's complaint of depression.

DSM-5 Depression

- Depressed mood
- Diminished pleasure
- Weight loss or weight gain
- Sleep difficulties
- Psychomotor agitation or retardation
- Fatigue
- Worthlessness/guilt
- Concentration decreased or problems with decision making
- Thoughts of death or suicide

Search for Objective Signs

- Obtain weights
- Observe facial expressions
- Observe body movements
- Observe interactions



Questions to Evaluate Depression

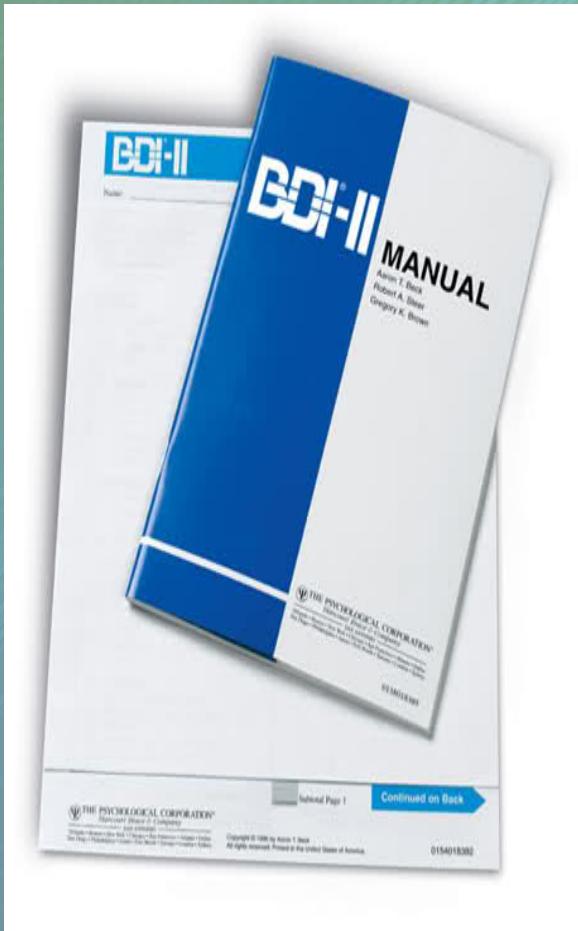
- Wide range of facial expressions?
- A normal range of motor movements?
- Laughing and joking during the evaluation?
- Activities they enjoy?

Evaluate Depression

- Actual weight change?
- Endorse symptoms unrelated to depression?
- High vs. low self-esteem?
- Others are to blame?
- Fail easy questions?



Beck Depression Inventory Study



- 52 untrained volunteers instructed to malingering depression
- 96% feigned depression
- 60% feigned severe depression

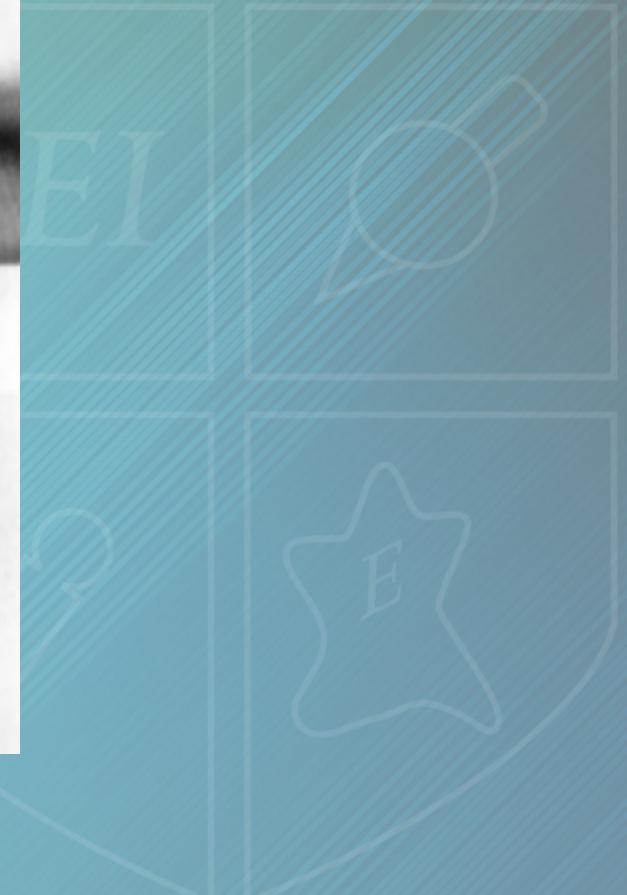
Malingered Psychosis



Can Mental Health Professionals be Fooled?



Rosenhan Study (1973)





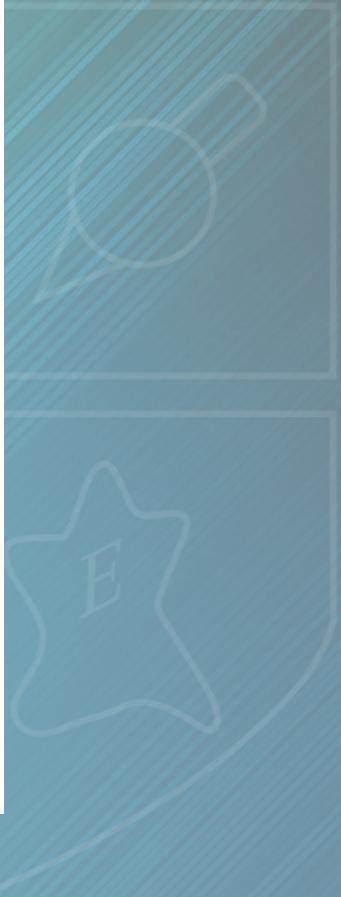
Rosenhan Study (1973)

- No prior psychiatric history
- Complained of “hearing voices” to hospital admissions
- All admitted to psychiatric ward
- Symptoms stopped after single report
- All given mental health diagnosis
- Some hospitalized up to 52 days



Clinical Clues

- Doesn't fit any diagnosis
- Overact part
- Contradictions
- Evasive





MALINGERED **vs.** ***TRUE*** **HALLU^CCINATIONS?**



Auditory Hallucinations

- Content
- Clarity
- Loudness
- Vividness
- Duration
- Frequency
- Continuous vs. intermittent
- Number
- Male/female
- Location
- Second/third person
- Insight into reality
- Belief others can hear
- Familiar/unfamiliar
- Relationship
- Other hallucinations?
- Talk back?

Evaluating Hallucinations

- Begin with very open-ended questions
 - “Is there anything else you can describe?”
 - “Anything else about this experience you remember?”
- Clinician Assisted Deception

Auditory Hallucinations

- Words or sentences
- Drug hallucinations—unformed noises



Nayani and David Study (1996)

- 100 patients with hallucinations
- Detailed inquiries about their experiences





Hallucination Content



- 60% of terms were abusive
- Terms of abuse different for men vs. women

Hallucinations

- Strategies to diminish?
 - 76% have identified at least one activity
- Common coping strategies noted
 - Working
 - Resting
 - Seeking someone out
 - Taking medication

Non-Helpful Strategies

- Being alone
- Radio
- Television
 - Voices comment about the programs



Summary

- Continuous not intermittent
- Vague or inaudible
- Not associated with delusions
- Stilted language
- No strategies to diminish
- Claim ALL instructions are obeyed



Suspect Malingered Visual Hallucinations When:



- Visual alone
- Lilliputian
- Giants
- Black and white only

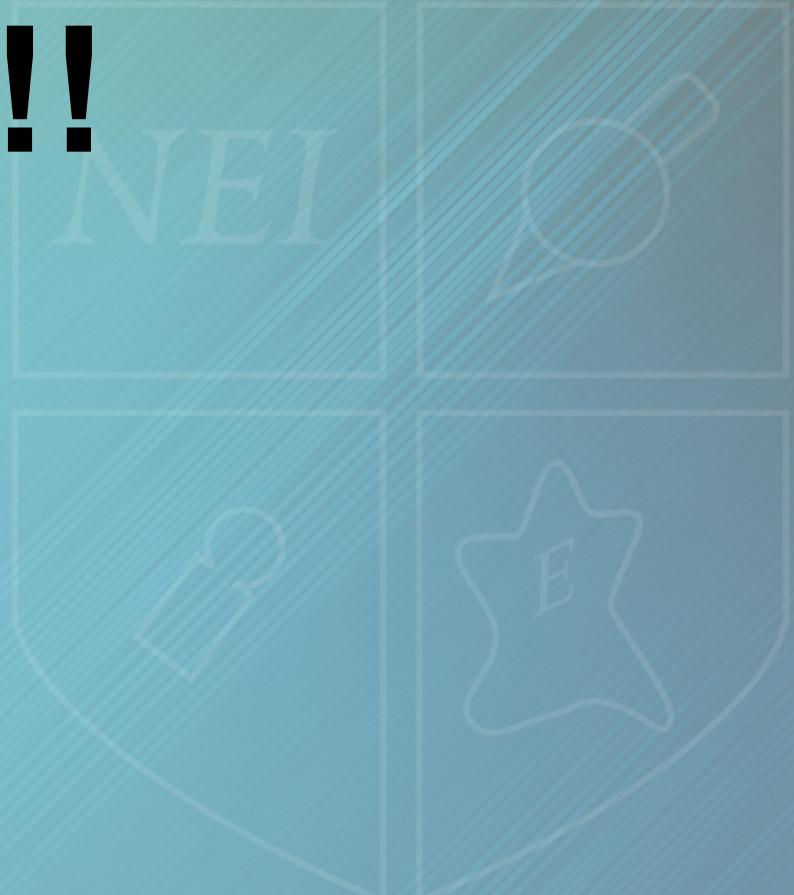


Visual Hallucinations

- Usually consistent with auditory hallucinations
- Dramatic atypical visual hallucinations should arouse suspicion



Beware of the Black Blob!!

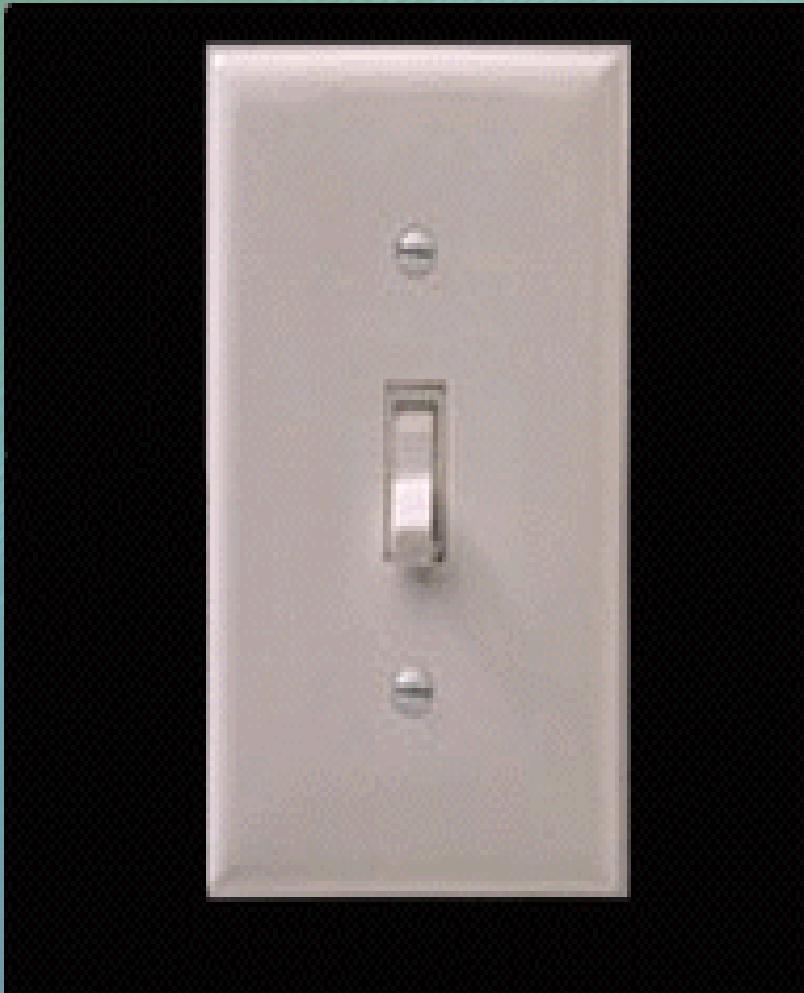




WASA



Malingered vs. True Delusions



- Know general themes
- Abrupt onset
- Eagerness to call attention to delusion

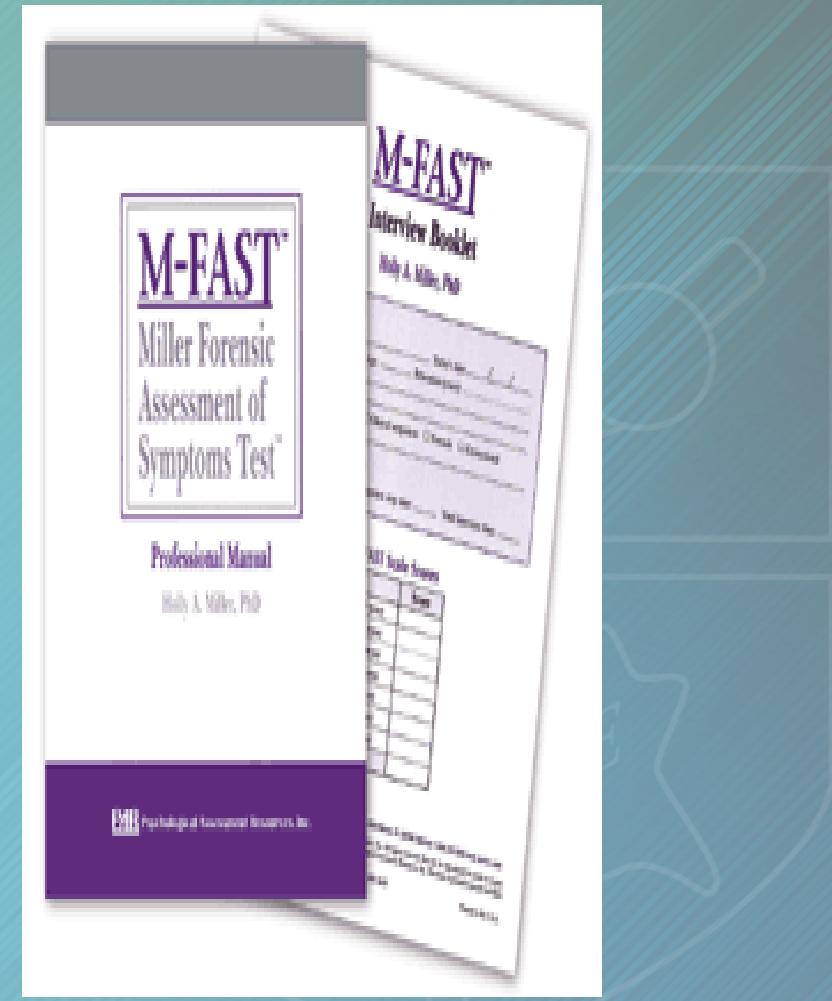
Suspect Malingered Delusions

- Conduct not consistent with delusions
- Bizarre conduct without thought disorder
- Exaggerated cognitive deficit



Miller Forensic Assessment of Symptoms of Test (MFAST)

- Screening instrument
- 25 items
- 5-minute administration
- Score of 6 indicates likely need for further testing



Psychological Testing

- **SIRS-2**

- 172-item structured interview
- 13 strategies to consider
- Also examines observations of self-report



Summary

- Malingering requires a determination that the person grossly exaggerated or faked symptoms with the intent to obtain a secondary gain
- Objective testing can be a useful tool to evaluate malingering
- Know typical and atypical symptoms of common psychiatric disorders

Posttest Question 1

The most characteristic feature of Ganser's syndrome is:

1. Approximate answers
2. Clouding of consciousness
3. Somatic conversion symptoms
4. Hallucinations

Posttest Question 2

The b test is an example of which testing approach?

1. Floor effect test
2. Symptom validity test
3. Gradient of difficulty test
4. Unusual pattern of responses test

Posttest Question 3

Which of the following is an atypical auditory hallucination?

1. The voice is heard outside the head
2. The voice is heard inside the head, like a strong thought
3. The voice is not associated with a delusion
4. The voice comes and goes