

Fregoli Syndrome: An Atypical Presentation

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Introduction

Fregoli's syndrome is characterized by a false delusional identification in which a stranger is mistakenly recognized as a familiar person, whom would be disguised, physically different [1]. This rare clinical condition was first described in 1927, by the french psychiatrists Courbon and Fail [2]. It is named that way in reference to Leopoldo Fregoli, an Italian actor who became famous for his agility in changing roles, changing clothes and accessories very quickly in his presentations.

For 35 years, Leopoldo Fregoli has impressed his audiences around the world. He started his career in his home country, Italy, becoming a great worldwide success, taking his show to countries like France, Spain, Germany, England and the United States, as well as South America. He ended his career in Brazil, in 1925, reaching the 10,000 performance mark. Leopoldo Fregoli was enormously successful in France, having been remembered by Courbon and Fail when describing the syndrome [3].

Delusion in this syndrome has a bizarre and persecutory nature and may be associated with experiences of depersonalization and derealization. In most of the described cases, the diagnosis was schizophrenia [4], but Fregoli syndrome and other delusional misidentification syndromes are common in dementia [5].

In addition to Fregoli syndrome, three other types of delusional misidentification syndromes are described: Capgras syndrome, intermetamorphosis and subjective double syndrome. In Capgras syndrome, the individual believes that someone close, such as a family member or spouse, has been replaced by an identical-looking imposter or lookalike who impersonates the person known to the patient. It represents a false non-recognition, and, in this sense, it would be the opposite of Fregoli's syndrome, which consists of a false recognition [6]. In intermetamorphosis, in turn, the belief is that someone close has become both physically and psychologically into another person [7]. Finally, the subjective double syndrome is characterized by an individual's belief that there is a stranger physically identical to him, but psychologically different. It is a purely delusional syndrome, not having a hallucinatory character, thus differing from autoscopy, in which the patient sees himself outside his body [8].

We reported the case of a patient with schizophrenia who presented a Fregoli syndrome with atypical aspects.

Study Description

A woman born in Brazil, single, an architect fell ill at the age of 35. At the time, without any plausible justification, she moved to the USA, without informing her family. She didn't know anyone in that country, and she didn't work there either. After a period of two years, in which she made no contact with her family, she called a cousin, crying a lot, to report that she had been a victim of a scheme, being chased by a major Brazilian television network,

the CIA and the FBI. According to the patient, they were spying on her through the television sets and, therefore, she could no longer bear to watch television. Soon after, with the help of her family, she returned to Brazil and moved in with her mother. She was started on psychiatric treatment, having used risperidone, which led to partial remission of psychotic symptoms. She kept up well, studying and working, but she would occasionally complain that a co-worker, or someone on the street, threw a kind of dust on her back at times when she was distracted. She believed this because she would feel an intense itch in the dorsal region.

At the age of fifty, she stopped using the antipsychotics on her own, and five years later, after her father's death, she was admitted to a psychiatric institution for the first time. Back then, during a period of five months, she would scream every night, waking up the neighbors, because she had the physical sensation of being sexually violated by her father's spirit (cenesthetic or visceral hallucinations). She decided to start sleeping on the apartment floor, because the bed she was sleeping in belonged to her late father. She also believed that all her family members were conspiring against her. According to her, each of them "transmuted", that is, assumed the appearance of another person or an animal, which she called "avatars" or "extraterrestrials". For example, during her interview with the doctor, she stated that the other was actually her cousin, although she recognized that the professional did not look like her relative. She also claimed that each member of the hospital's medical staff was in fact a member of her family in disguise, who would have taken on a new appearance. In addition, she reported that she had once recognized a close relative in a dog she had seen on the street. Besides, she would be frightened whenever she saw birds, because, to her, it would be possible that they were actually her "transmuted" relatives. During hospitalization, she also presented soliloquy, which indicated the presence of auditory hallucinations. She underwent an MRI scan of the skull, and the results did not show any alterations. She used olanzapine, 20 mg a day, for a few weeks, which led to a partial improvement in symptoms. The delusional belief was still there; however, it no longer bothered her or affected her behavior. In addition, there was remission in hallucinatory activity.

In general, the delusional misidentification syndromes are more commonly associated with lesions in the right hemisphere, especially in the frontal lobe [9]. Kakegawa, et al. found ten cases of Fregoli syndrome in a sample of 874 patients who had suffered a recent stroke [10]. All ten had lesions in the right hemisphere, in areas connected by the uncinate fascicle. Langdon, et al. elaborated a classification of the Fregoli cases in four subtypes, according to the number of people involved [11].

Conclusion

The ratio between the number of familiar persons and strangers could be: one to one; several to several; one to several; or several to one. As far as we are concerned, prior to this case report, a case of Fregoli Syndrome

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in which familiar persons had been falsely recognized by the patient, not only in other people, but also in animals, had never been published.

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