



Shared psychotic disorder in the Family Environment: A Case of Shared Delusion Between a Mother and Her Son in Marrakech, Morocco

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ABSTRACT

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Shared psychotic disorder, is a rare psychiatric condition characterized by the transmission of delusional beliefs between closely associated individuals. This case report describes a unique occurrence of FAD involving a 45-year-old mother and her 22-year-old son in Marrakech, Morocco. The pair developed a shared persecutory delusion centered on familial betrayal, leading to severe social isolation and functional impairment. Clinical evaluation revealed no prior psychiatric history in the son, while the mother had untreated delusional disorder. Both exhibited identical delusional content, which resolved in the son following separation and antipsychotic treatment. This case highlights cultural and familial dynamics in FAD, emphasizing the need for early recognition in resource-limited settings.

KEYWORDS:

Folie à Deux, shared psychosis, family dynamics, delusional disorder, Morocco

I. INTRODUCTION

Folie à Deux (FAD) is a rare psychiatric phenomenon where delusional beliefs transfer from a dominant "inducer" to a susceptible individual, often within close-knit relationships. While cases are documented globally, reports from North Africa, particularly Morocco, remain scarce. Cultural factors, including familial cohesion and stigma around mental health, may influence FAD presentation and treatment challenges. This article presents a novel case of mother-son FAD in Marrakech, contextualized within Moroccan sociocultural norms.

Mother (Z.B.):

- History of untreated persecutory delusions over 5 years.
- Refused prior psychiatric care due to stigma.
- Dominant personality; insisted her son remain home for "protection."

Son (M.B.):

- No prior psychiatric history.
- Dropped out of university to stay with his mother.
- Adopted her delusional beliefs verbatim, stating, "We can't trust anyone but each other."

2. Examination and Diagnosis

- **Mental Status:** Both displayed congruent persecutory delusions, hypervigilance, and flat affect.
- **Physical Health:** Mild malnutrition due to self-imposed dietary restrictions.
- **Diagnostic Criteria (DSM-5):**
 - Z.B.: Delusional Disorder, Persecutory Type.
 - M.B.: Shared Psychotic Disorder (FAD).

3. Intervention

1. **Hospitalization:** Separated mother and son to disrupt shared delusional reinforcement.
2. **Pharmacotherapy:**
 - Z.B.: Initiated on risperidone 4 mg/day.
 - M.B.: Olanzapine 10 mg/day.

II. CASE REPORT

1. Clinical Presentation

A 45-year-old mother (Z.B.) and her 22-year-old son (M.B.) were brought to the psychiatric emergency department at CHU Marrakech by relatives. For 18 months, the duo had isolated themselves in their home, claiming extended family members were plotting to "steal their land and poison their food." The delusion began after a property dispute with Z.B.'s siblings.

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3. **Family Therapy:** Addressed property disputes and educated relatives on FAD.
4. **Outcome**
 - M.B.'s delusions resolved within 4 weeks. He resumed university after 3 months.
 - Z.B. showed partial improvement but remained distrustful, requiring long-term community follow-up.

III. DISCUSSION

1. Cultural and Familial Context

This case reflects Moroccan familial dynamics, where property disputes often escalate into prolonged conflicts, exacerbated by legal bottlenecks. The mother's authoritative role and the son's filial loyalty created a vulnerable dyad for FAD development. Similar to cases in [1] and [3], isolation and entrenched power imbalances facilitated delusion transmission.

2. Challenges in Low-Resource Settings

- **Stigma:** Delayed presentation due to fear of judgment aligns with findings in [2], where families avoided psychiatric care until crises occurred.
- **Treatment Barriers:** Limited access to antipsychotics and psychotherapy in rural Morocco complicates FAD management.

3. Differentiation from Other Psychoses

Unlike the "folie en famille" cases in [3], this dyad lacked generational hierarchy (e.g., grandparents), focusing instead on maternal influence. The son's rapid recovery post-separation supports FAD's diagnostic criteria rather than independent psychosis.

IV. CONCLUSION

This case underscores FAD's relevance in Moroccan psychiatry, particularly in familial conflicts over inheritance or property. Early separation of the inducer and susceptible individual, combined with antipsychotics, proved effective. Public health initiatives to reduce mental health stigma and improve rural psychiatric access are critical. Further research on FAD in collectivist cultures is warranted.

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