

## Forensic Psychiatric Study of Psychoses

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### Introduction

For forensic psychiatry, the essential aspect of psychotic disorders to be considered is the impairment of cognition, which affects understanding and, in most cases, is accompanied by other manifestations of the affective sphere and psychomotricity.

Cognition is a set of processes that mediate between intellectual contact and reality, making possible the knowledge and understanding of the external world and of the subjective experience itself, having an articulation, as a system, with other levels of mental activity. It is not infrequent that cognitive disorders are concomitant with processes of affective and conational commitment. It should be noted that human cognition is not a simple information processing, but the elaboration of experiences of a living and sensitive creature, within a sociocultural and historical context.

Volition understood as the cognitive deliberation of acts, encompasses both understanding and initiative, and both can be affected by emotions and affective states, due to the functional and systemic integration of mental processes.

During the occurrence of a psychotic disorder, the subject is considered to be incapacitated, for all purposes, but the cessation of individual rights and duties in the legal sphere safeguards his inalienable rights and, therefore, he will have the effective assistance of another, legally designated.

The quality of psychotic is not indifferent to forensic psychiatry, as it involves behaviors in which the relationship with the objective world is compromised in several ways and almost always in a serious way, leading to acts or infractions that jeopardize their own personal and that of third parties.

In this way, it is essential that the individual who committed the crime be submitted to a psychiatric expert examination so that the relationship between this and the psychiatric symptoms presented at the time when it was perpetrated can be established. A report will be prepared by the forensic psychiatrist containing all the psychiatric-forensic considerations.

The psychiatric-forensic considerations constitute an essential part of the report, representing the share of psychiatric knowledge fundamental to the elucidation of a fact of legal interest, containing the reasoning and the final contribution of the experts. In this topic, the experts will base the psychiatric diagnosis, based on the highlighting the most important psychopathological alterations indicated in the psychiatric examination, appreciating the influence of mental illness on the ability to understand and determine at the time of the crime, and, finally, determine if there is a causal link between the disease and the crime committed.

If a psychotic mental disorder is proven in the expert examination, the legal consequence will be the determination of civil incapacity or criminal irresponsibility, provided that the causal link is verified. The attested disability may or may not be definitive, but it is complete in cases of psychotic disorders.

In both types of expertise, civil and criminal, the notion of the lucid interval, its prodromes, the period of state, and the modes of resolution are considered essential, covering complete or partial recovery, relapse or recurrence, and recurrence of the disorder.

The lucid interval, which adds to the more accurate determination of the onset of the disorder, is defined as the period between outbreaks or recurrent phases of psychotic disorders when mental capacity is fully restored. In this way, if the facts pointed out by the process fall within the lucid interval, the individual will be considered capable and imputable from a medico-legal point of view.

### Confusional psychoses

The occurrence of criminal behavior in these subjects is small since in general they are seriously ill and hospitalized. Of importance is delirium tremens, associated with alcoholism, whose lowering of consciousness can be followed by agitated behavior and function the one that integrates the other psychic functions, there will be total incapacity for understanding and determination. If there is a causal link between the crime and the mental state, non-imputability is established.

### Schizophrenia

In schizophrenia, the subject gets used to living according to his delusional ideation and distorted interpretations that, combined with changes in the affective sphere, can make him act with extreme violence. The vast majority of crimes committed by schizophrenics happen in the family environment and during the initial phase of the disease. In the phase where there is already a deterioration of the personality, the criminal acts are in general, sudden and unmotivated.

There are clinical modalities, according to current clinical criteria, capable of complete recovery, even if it is recognized that a portion of schizophrenic disorders assumes a chronic and disabling feature. In cases where satisfactory recovery is observed, recurrence of the disorders is common, in a relatively unpredictable manner. However, there are schizophrenic modalities that are refractory to current therapeutic resources and in which there is no full restitution to the state of normality, with a stable deficit or gradual evolution to residual states.

It becomes crucial for the forensic psychiatrist to determine permanent or temporary disability. Since, in certain cases, a flare-up or series of flare-ups resolves with complete recovery and no recurrence, periodic evaluation is recommended. The notion of dangerousness derives from inductive clinical reasoning, based on the history and the examination of the current state. Risk assessment is not without a probability and almost premonitory character, since human behavior is not subject to deductive or predictive laws of certainty. Therefore, the expert must take into account, in the current assessment of dangerousness, objective data obtained from various sources of information on the personal history as well as updated research evaluations on the topic in focus, including the results of the therapy of new medications. Some premorbid personality characteristics are significant factors in risk assessment: extreme impulsiveness, impulsive lack of control, and persistent hostility are traits that elevate the risk of violent or offending behavior. Positive symptoms, hallucinations, and delusions of a persecutory, accusatory, or alien influence syndrome may also increase the risk of aggressive or violent behavior. Adherence to appropriate treatment and response to therapy are also important factors. The unfavorable evolution, especially in progressive and residual schizophrenic modalities, has an influence on dangerousness, reducing the risk due to affective-emotional impoverishment and lack of initiative.

The most frequent schizophrenia subgenre in criminal forensics is paranoid. Driven by psychotic symptoms (persecutory delusional ideas and auditory-verbal hallucinations), these individuals may act violently. Therefore, they become unaccountable.

In the Brazilian criminal justice system, an individual who commits a crime, but falls within the caput of article 26 of the CP, will be acquitted. However, due to the other articles of the criminal law, it will be subject to the compulsory application of security measures.

### Psychotic mood disorders

Manic episodes associated with psychotic symptoms, often of a paranoid appearance, accompanied by intense excitement and psychomotor agitation, can lead to the practice of violent acts. Therefore, they become unaccountable. In depression with psychotic symptoms, the person, due to his delusional interpretation, may think that he and a family member will suffer for all eternity or that they will be condemned, and thus plan the murder of that family member followed by an attempt at self-extermination. With some frequency, we find situations in which only the homicide was committed, with the subject only being injured after having been prevented from committing suicide by others. Certainly, these cases also configure non-imputability.

The states of hyperphoric arousal compromise the capacity for self-control, exposing them to risk or criminal behavior. Casually, lavishness occurs, with excessive spending that dissipates fortunes. During the manic phase, the person becomes unable to manage their assets. The notion of a limit is lost in the scope of the personal relationship, during the state of mania. As a result, friction, is often serious, with offenses characterized as indecent exposure, violence, sexual abuse, and even murder. During the manic phases with irritability, there are often violent releases, which are refractory to the interventions of others and which can have tragic consequences.

The forensic implications of schizoaffective disorders are similar to those of mood disorder in terms of loss of self-control and morbid consciousness. Obviously, if the offending conduct occurs during the lucid interval, the subject is considerable attributable.

### Persistent delusional disorders

Persistent delusional disorders, as they take on a psychotic form, entail disability and, according to forensic criteria, non-imputability. It has been observed, in family aggregation studies, an affinity between delusional psychoses and paranoid personality disorders, as well as with schizophrenia. Delusional people, when they harm their loved ones, do so because of their convictions, but do not invent complaints or symptoms to harm them, accusing others, unlike what occurs in factitious or proxy disorder, where suffering is actively produced by the individual himself in defenseless people or children, out of a need for appreciation or defamatory intent, not being motivated, therefore, by delusional ideation.

### Polymorphic psychotic disorders

This diagnostic category is distinguished by the noisy and protean aspect of the manifestations, with mental excitement or intense withdrawal, affective lability, sudden and accentuated emotional changes, diffuse delusions, and hallucinations of different modalities.

Because polymorphic psychotic disorders are transient, it is often difficult to determine whether the offense occurred during the critical period or the lucid interval. It is of fundamental importance to clarify this issue, as it directly involves the issue of criminal liability. Although they are brief, polymorphic psychotic disorders cause maladjustment as severe as schizophrenia.

### Induced delusional disorder

The individual who assimilates the delusional ideas starts to act in consonance with the psychotic, supporting his actions and also acting under his influence. Often, the inducer has a delusional or schizophrenic disorder and usually has an intense and intimate relationship with the inducer. Legally, the interest in this situation is identical to that of affective capture. Affective capture is the designation of another form of personal influence, relevant to forensic psychiatry. Corresponds to involvement with a susceptible person, either due to affective dependence or debilitation resulting from an illness or due to advanced age. The active person, in affective capture, interferes with the

decisions of the vulnerable individual, leading to acting for his benefit. Funding becomes significant in matters of patrimonial inheritance, asset management, and wills. The acts committed by the subject who suffered affective capture can be invalidated through legal means.

In induced delusion, the influenced individual, who is not usually psychotic, can be led to practice illicit acts, with risks for himself and others. Induced delusion often occurs in people who are suggestible or intellectually impaired. For this reason, if the person being influenced commits infractions, the expertise should focus on the assessment of civil capacity or criminal liability.

### Other psychotic disorders

Reactive psychotic disorders are occasional manifestations resulting from special stress situations. Vulnerability is always on the agenda, as an individual constitutional provision or as an individual predisposition. Reactive psychotic disorders assume different clinical configurations. They start suddenly and resolve quickly unless exacerbated by previous emotional or personality problems. These disorders always subside in a few days, with full recovery and the difficulty for forensics only happens when there are important pre-morbid aspects. The examination of civil or administrative capacity and liability for infractions will depend on the severity of the mental retardation or immaturity itself. In these situations, the help of legal psychology may be necessary [1,2].

### Bibliography

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