

Same Gender De' Clerambault in a Man: Case Report

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Abstract. Currently, Gender De 'Clerambault or erotomania is a very rare case, especially in men. This disorder is related to a person's culture and socioeconomic, with the most prominent symptom being delusional disorder, and the best treatment is antipsychotics. Mr. H, age 40, complained of sleeping difficulty and felt loved by the artist he idolized. In this case, there were hallucinations but not daily. The most prominent symptom was that he felt liked and had a 5-month relationship with the artist he idolized. The patient was administered antipsychotics and mood stabilizers. A case of erotomania was discovered in a male patient. Furthermore, this disorder is very rare, especially in men. The first line of treatment administered in this case is antipsychotics, and afterward, changes were observed.

Keywords: male · adult · antipsychotic agents · antimanic agents · hallucinations · emotions

1 Introduction

Erotomania delusions are a major symptom of the clinical psychiatric condition de' Clerambault's syndrome, described in detail by Dr. De Clérambault (1872–1934). Gaetan de Clérambault is a well-known Parisian psychiatrist working as head of the Prefectural Police Special Nursery in Paris. Dr. De Clérambault presents various cases of psychosis characterized by passional delirium, which is known as erotomania, "psychose passionelle", or De Clérambault syndrome [1, 2]. Erotomania is a delusional disorder in which one feels loved by others. Furthermore, it has long been a symptom of the search for an adequate conceptualization and has been incorporated into the diagnostic system in various ways [3].

The erotomania syndrome can be discovered in the works of Hippocrates, Plutarch, and Galen. In the book "Disease of the Mind" published in the sixteenth century, the French physician Bartholomy Pardoux (1545–1611) distinguished between "insane love" (erotomania) and "uterine furors" (nymphomania) [1]. De Clérambault or erotomania is a form of delusional disorder in which this diagnosis is sometimes frequent and difficult to find during psychiatric history. Despite primary erotomania and pathological jealousy being investigated in the psychiatric literature in the late 1900s, this condition was rarely observed or reported. Presently, erotomania is rare, and much of the recent

focus has been on the disorder's relationship to stalking, particularly in the context of the notorious case in the US [4].

Erotomania is often not recognized as a syndrome classified into a broader psychiatric category. The incidence of this disorder is unknown because the literature related to it is mainly from case reports and a small sample of patients. This is rarely explained to the elderly; Helen and Chiu stated that the prevalence of de Clerambault syndrome in older psychiatric patients was 0.8%. However, they recommended caution in interpreting the results because their study was a retrospective case report of referrals to a single psychogeriatric unit [5]. Other people are often not aware of the existence of erotomania patients. There is no evidence of love from the other person, but the sufferer could talk about the other individual incessantly and be obsessed with meeting or communicating [6]. The following characteristics are exhibited by erotomania patients [6]:

- 1. The patient often believes he is loved by other individuals with higher social status, such as famous figures or celebrities.
- 2. Other people usually believe the patient's story of having a relationship with a loved one when there is none.
- 3. Despite the "relationship" being perceived as platonic, the patient usually has strong erotic feelings for the other person.
- 4. This disorder often appears suddenly or gradually.
- 5. Some people with tactile hallucinations could believe a lover at night visited. This phenomenon is sometimes known as "incubus syndrome."

Cultural factors often influence De Clérambault. According to G. G. de Clerambault, the first to systematically classify the disorder, those with erotomania believe their lives are miserable because of the many stresses of life and the pleasure of admiring people of higher social position. Women often like people with jobs such as doctors, pastors, celebrities, and CEOs, while men usually prefer younger and more attractive women [7].

2 Case

Mr. H, a 40-year-old man, came to a psychiatrist with complaints of 5 months of sleeping difficulty and frequent dreams about a male artist with whom he felt a connection. This man was previously diagnosed with schizophrenia when he was 35 years old. At that time, Mr. H had gone to a psychiatrist and had undergone treatment for approximately 3 years. There was an improvement in the absence of hallucinations and delusion. Furthermore, the initial stressor was that Mr. H was abandoned by his wife because he had a low socioeconomic status. He presently loves watching Korean dramas and sometimes screams happily when his preferred artist appears.

When asked if he had a relationship with the artist, Mr. H said they secretly met in Bali. However, his family said he had never traveled to Bali. When Mr. H was asked why he liked the man, he stated being kind, very dear to his family, loyal, and very handsome. He further said the feeling came suddenly after watching Korean dramas and then deepened. Mr. H also said he frequently messaged via WhatsApp and Instagram,

Time	Follow Up
40 years old	First erotic
2 weeks of treatment	The delusion is still visible
4 weeks of treatment	The delusion is still visible, but the intensity is starting to decrease

Table 1. The symptoms experienced by patients based on the duration of treatment

but the family said there were no messages and were confident because they had checked his social media accounts. Afterward, he was questioned about him being sure of having a relationship. The reply was that he had a relationship and seemed embarrassed. Mr. H also said he was sometimes jealous of the artist's co-stars. Auditory hallucinations were discovered when he felt he had contacted the artist at no other time. Additionally, visual hallucinations were observed when he felt he had met the artist. Mr. H occasionally felt he had too much energy, while there was no history of substance use and medical illness.

Blood, kidney function, liver function tests, and CT-Scan were conducted on Mr. H, and the results were normal. In medical history, he had been treated 5 years ago and received antipsychotic medication (risperidone). Furthermore, he once had a wife in the past and no children. Meanwhile, he had 3 female ex-girlfriends in his love history.

Mr. H as the patient was subsequently given antipsychotics (risperidone), and a mood stabilizer (Divalproex Sodium) and the changes were seen. The detailed can be described in Table 1.

3 Discussion

A male patient with erotomania (De 'Clerambault's Syndrome) was discovered, a very rare disorder in men. Despite the incidence of erotomania being unknown, it is a delusional illness that is generally reported with 15 cases per 100,000 population yearly with a female and male ratio of 3:1 [8]. In this case, it was discovered that the liked person and also the patient were male. Ruzita Jamaluddin in 2021 reported 2 cases in the report where the first case was female aged 28 years, and the second was 42 years old [9].

It was also discovered that this case has been ongoing for 5 months. The dominant cardinal symptom is erotomania, which according to the diagnostic criteria of ICD 10, is a delusional disorder. The complication has been present for at least 3 months and is personal rather than subcultural. Furthermore, symptoms such as severe depression (F32.-) could appear intermittently, as long as the delusion persists in the absence of mood disturbances. There is no evidence of brain disease, occasional auditory hallucinations, and a history of schizophrenic symptoms, including delusion of control, scattered thoughts, and others [10]. In this case, the patient is administered antipsychotics in the form of risperidone, where this treatment is proven to be useful in reducing the intensity of delusion and controlling behavior. Risperidone at doses below 6 mg/day is the first line of therapy, and pure/primary erotomania responds best to neuroleptic treatment [11].

4 Conclusion

A case of erotomania was observed in a male patient, a very rare disorder, especially in men. The first line of treatment administered in this case is antipsychotics, and afterward, changes were observed.

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