

Case report

Dissociative amnesia: a case report

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Summary

Functional retrograde amnesia or dissociative amnesia is often associated with physical and/or psychological trauma. We encountered a female patient ageing 18 years who could not recall the last 5 months of her life after stressful life event. This case report describes a patient suffering from retrograde episodic-autobiographical amnesia for around 1 month after a discord with her husband. She forgot that she was married and forgot every incident which was related to the marriage. Her semantic memories and social abilities were largely preserved though she couldn't recall people she met within last five months. All the examinations were negative for organic pathology. Same stress can result in variable presentation in different persons. This case report focused on stress induced dissociative amnesia and recovery in 18 years old women.

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Introduction

Dissociative disorders are a multipart syndrome. As it has multiple expressions and the wide variety, defined by disturbances of every area of psychological functioning, affecting functions that are normally integrated such as memory, consciousness, identity, emotion, perception, body representation, motor control, and behavior.¹ Dissociation is a rare disorder. Its prevalence estimated to be 0.2%.^{2,5} The commencement of this disorder is usually abrupt and predicated by traumatic or stressful life events. Functional amnesia involving autobiographical memory is hallmark sign in a major class of mental illnesses known as dissociative (conversion) disorders.³ These categories of cases are seen in patients after physical trauma and/or psychologically stressful events, such as natural disasters (i.e. earthquakes and floods), marital discord, physical assault, personal threats, and war or military-related activities.⁴ According to DSM 5, dissociative disorders are dissociative identity disorder, dissociative amnesia depersonalization/derealization disorder, other specified dissociative disorders and unspecified dissociative disorders.⁵

Case summary

A Bangladeshi woman, aged 18 years, visited outpatient department of National Institute of Mental Health (NIMH), Dhaka accompanied by her mother on 15th July 2021. The mother explained that, the chief purpose of her visit was to be diagnosed officially by a psychiatrist in order to rule out other fatal organic causes of her daughter's condition. According to the mother,

her daughter was well 1 week ago. Patient got married over phone to a man 5 months back who worked in Saudi Arabia. After marriage she was continuing her studies from her mother's house. Patient and her husband were in regular contact with each other over mobile phone. Before the incidence her husband started to accuse her of infidelity involving her other male classmates from college. Quarrel about this went on for around a week. Also, she was worried that her husband won't let her continue her studies. She was anxious throughout the time. Suddenly one day she couldn't identify her husband when she received the phone call from him. When her mother came to know about the incident, it was noted that she can't recall her past 5 months of life events. During the last 5 months she gave higher secondary examination. She couldn't recall about taking the board exam. Her pre-morbid personality revealed she had lack of self-confidence and needed excessive reassurance. She didn't have close relationship beyond family members. She was very sensitive to criticism being judged negatively. She was the only child of her parents. No reported family history of mental illness was found. Cautious medical examination was performed. General physical and neurological examinations revealed no pathological findings. She was alert and oriented to time, place and person. But when precise questions about last 5 months were asked, she was getting anxious. She also experienced some symptoms associated with anxiety such as increase worry about why everyone was asking about her being married. She complained of having difficulty in sleeping. The problem was of recent onset. Also, she was worried about

her higher secondary examination saying her preparation was not good enough. She couldn't recall that the examination had already taken place. Computed tomography (CT) scan was performed along with other biochemical markers. Those revealed no abnormality. Patient regained her all memories after around one month. During the time she got two sessions of psychotherapy. She also received antidepressants simultaneously. During follow up visit, her mental state examinations revealed that, she was anxious during that time. No other gross abnormality was noted. She was given medication for anxiety and advised to come for follow up.

Discussion

This paper describes the patient who suffered from retrograde amnesia for part of her autobiographical information. This supposedly resulted from stressful event she experienced due to marital discord. In psychogenic amnesia, a suspected internal conflict is manifested by memory loss and subsequent dissociative state. The most common form of this amnesic state involves only a few hours of loss of recall following the traumatic event. However, the amnesia may be total with a life time of memories lost.⁶ Our patient suffered from memory loss for around 1 month. With medications and 2 sessions of psychotherapy patient could recall the life events.

The course of functional amnesia is diverse, though maximum patients recover their lost memories sooner or later. Nevertheless, some patients endure in the same condition when the time of onset of amnesia is for more than several years.⁷ Our patient denied of having any delusion or hallucination. No psychotic manifestations were noted. Amnesia due to substance was also an unlikely possibility considering this patient. There was a chance that it could be malingering. But apparently no conscious motive was visible for such presentations.

Of the 30 cases of unidentified patients presenting to the psychiatric emergency service as reviewed by Parks et al, the most common diagnosis was psychosis followed by intoxication, malingering and psychogenic amnesia.⁸ Psychoanalytic theory suggests that, psychogenic amnesia may represent an unconscious attempt to avoid an intolerable conflict. Freud has

written that "it is an undoubted fact that disagreeable impressions are easily forgotten."⁹ Repression of memory provides protection from emotional pain that aroused from either disturbing external circumstances or anxiety-provoking inner drives. Patient was the only daughter and rarely faced any real-life difficulties. She could not manage the stress related to marriage.

Conclusion

Uncertainty of education and stress from marriage predisposed this young woman to amnesia, she suffered from retrograde episodic autobiographical memory loss covering 5 months of her life. Doctors and other professionals who have to deal with problems which start after stressful life events should keep in mind about dissociative spectrum disorders, such as psychogenic amnesia.

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