



Do as I Say, Not as I Do: End-of-Life Decision Making in Frontal Lobe Infarct Presenting With Imitation Behaviors

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Introduction

- Evaluating the capacity of intubated patients in the clinical setting is challenging, especially when confounders like delirium or other neurological conditions are present.
- This report presents a case of capacity evaluation in an intubated patient with imitation behavior, which caused confusion among the treatment team.

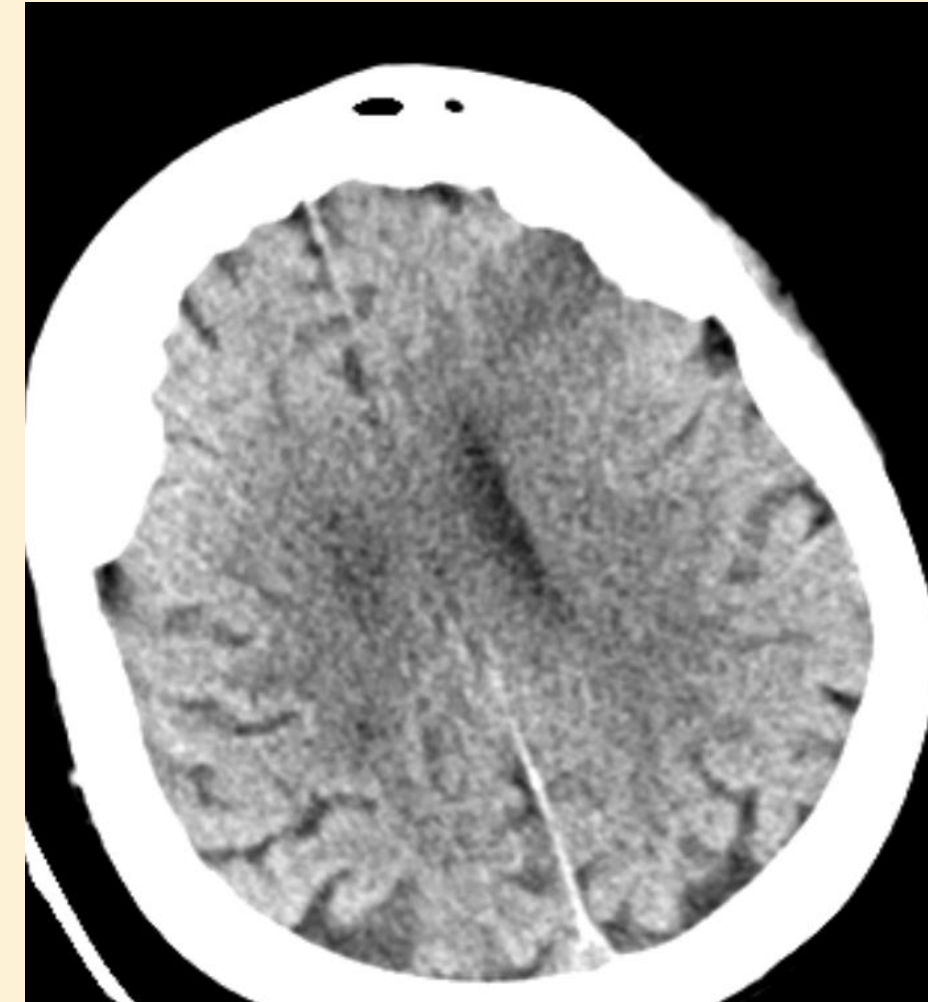


Table 1: Possible Etiologies for Imitation Behavior

Catatonia	Autism Spectrum Disorder
Intellectual Disability	Dementia
Tourette Syndrome	Brain Tumors
Stroke	Culture-Specific Syndromes
Ganser syndrome	

Case Presentation

- An 81-year-old female with no past psychiatric history and a past medical history of end-stage pancreatic adenocarcinoma was admitted to the hospital for generalized weakness.
- Cranial CT showed hypoattenuation within the left anterior frontal lobe, which is suggestive of acute/subacute left MCA territory infarct. The patient was emergently intubated due to acute respiratory failure. The patient was able to express needs with non-verbal gestures.
- Brain MRI shows multiple prominent areas demonstrating restricted diffusion involving the bilateral cerebellum, bilateral occipital lobes and left frontal lobe. Smaller foci of restricted diffusion involving the bilateral temporal lobes, bilateral thalami, right caudate nucleus and right frontoparietal cortex
- Consult reason: Assessment of the patient's capacity to consent or refuse life sustaining measures : PEG, tracheostomy, intubation
- They felt that the patient consistently expressed her wishes to discontinue life-sustaining measures. However, the patient's family desired to continue life-sustaining measures, as they claimed that the patient had previously expressed her desire to do so consistent with her religious beliefs.
- Assessment: The patient was evaluated using a pre-prepared set of yes-no questions, repeated for validation, with pauses after each question to allow for nonverbal response. The patient's responses were inconsistent.
- It was observed that the patient was following the unintentional head movements of the interviewer. The questions were then repeated with intentional head nodding or shaking by the interviewer, revealing that the patient responded affirmatively three times to the question "Are people purple?" and negatively three times to the question "Is a dog an animal?".
- Plan: The patient was deemed incapable of making a decision regarding the planned interventions.

Discussion

- This report presents a case of capacity evaluation in an intubated patient with imitation behavior secondary to frontal damage due to a cerebral infarct. Imitation behaviors can confound typical non-verbal communication.
- The Fronto-median cortex and right temporoparietal junction are implicated in imitation response inhibition and the former was lesioned in this patient (1,2). Loss of response inhibition can make non-verbal communication especially challenging given the inadvertent influence of the interviewer.
- This case highlights the importance of validation of interview questions as well as careful design of interview structure to minimize inadvertent bias.

Conclusions

- Here in, we presented a complicated capacity evaluation in intubated patient with imitation behavior secondary to anterior frontal lobe infarct.

References

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