

DELUSIONAL INFESTATION (EKBOM SYNDROME) ASSOCIATED WITH POST-EARTHQUAKE TRAUMA AND SOCIAL ISOLATION

Ezgi Çankaya İnan

Department of Psychiatry, Defne State Hospital, Hatay, Türkiye

OBJECTIVE: Delusional Infestation (DI), or Ekbom Syndrome, is a rare somatic delusion involving false beliefs of parasitic infestation. Patients often report itching and formication. Post-disaster stressors like PTSD, grief, and social isolation can trigger these delusions. This case discusses an Ekbom Syndrome patient living alone in a tent city after an earthquake, focusing on clinical characteristics and the significant challenges encountered in his treatment management.

CASE: (The patient consent must be provided and specified with appropriate terms). A 55-year-old male (Mr. E.), who lost his family in the earthquake and lacks social support, lives alone in a tent. Believing that insects were gnawing at his body, the patient caused deep excoriations on his feet by scratching his skin. Multiple dermatology visits revealed no evidence of parasites. The patient was brought to the psychiatry clinic by a hospital employee. During the examination, his presentation of dust particles on his glasses as “evidence” (Matchbox Sign) was notable. In the mental state examination, his self-care was diminished, affect was restricted, and mood was anxious. Somatic

delusions and tactile hallucinations were prominent. The patient lacked insight, and his judgment was impaired. Laboratory tests and brain MRI were normal. Olanzapine (5 mg/day) was initiated. To ensure medication adherence and evaluate treatment response, a follow-up process has been planned in collaboration with local social services and shelter officials. To maintain ethical standards, the patient’s identity was kept anonymous.

DISCUSSION: This case illustrates how severe psychosocial trauma can manifest as a somatic delusion. Self-mutilation via scratching reflects the intense anxiety generated by the delusional belief. The “Matchbox Sign” displayed via eyeglasses underscores the strength of the delusional system. Social isolation in disaster zones complicates treatment adherence, highlighting the importance of integrated social service networks in psychiatric care. In conclusion, our case emphasizes that chronic stress and grief in disaster settings can trigger rare somatic delusions.

Keywords: Delusional infestation, earthquake, somatic delusion, social isolation