

Taking the children

Cover Story

Byline: Ellen Connolly

Sir Roy Meadow

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On a cold drizzly day in January 1999, Michelle and Will Carter were at home

in Kent, England, listening nervously for a knock at the door. Three hours later, their visitor finally appeared; a grandfatherly figure strolling up the path of their council home. Professor Sir Roy Meadow, a Leeds-based pediatrician, had come to assess the medical history of the couple and their four children, Anne, 13, Simon, 10, Margaret, 4, and Rachel, 2.

A year earlier, Rachel Carter had been taken to hospital suffering from a stroke. Doctors initially put the attack down to a combination of trauma from a previous operation, a severe bout of chicken pox and a protein deficiency. But when a urine sample showed traces of a drug in Rachel's system, Michelle Carter was accused of trying to poison her.

The Carters assured police there was nothing untoward and explained that the toddler might have accidentally taken a bed-wetting tablet prescribed for their eldest daughter. Rachel recovered and police accepted the Carters' explanation, taking the matter no further.

Social services, however, remained suspicious. There was talk of child abuse. Then Roy Meadow was called in.

Michelle Carter welcomed their visitor with a cup of tea, and for the next three hours they all sat around the living room, chatting. Will Carter recalls that the doctor was "very pleasant and put us all at ease". The children liked him, too; Rachel sat on his knee briefly, while he let Margaret draw pictures on his notepad.

"Basically he told us: 'All I'm here to do is take a look at everything and make my report,'" Will says. "He left us with the feeling that everything was going to be all right."

But three weeks later, when Meadow delivered his report, the conclusions were devastating. It was his belief that Rachel had been poisoned - and the other

children might be next. Mrs Carter, he wrote, was suffering from Munchausen Syndrome by Proxy (MSBP), a condition Meadow had identified and named more than two decades earlier, in which a parent, usually a mother, exaggerates a child's illness or deliberately makes the child ill in a bid to get the attention of doctors.

Meadow recommended the Carter children be taken away from their parents and placed into care. On February 12, a month after his visit, a magistrate ordered just that. On that day, the Carters were told to bring their children to court. There, they sat and listened to court orders that would destroy their family unit forever. When it was over, they were allowed to go into a little room together to say their goodbyes. "We just told them they were going on a holiday," Will Carter says, still sounding bewildered. And then, "We were told to go home, forget we ever had four children and to get on with life."

The Carters' case is not an isolated one.

In the past 25 years, thousands of children across the Western world have been placed into foster care or put up for adoption, their parents branded would-be or actual killers. In a handful of instances, the parents stood trial in criminal court; some were jailed. Mostly, however, the cases were heard away from public scrutiny in civil or family court hearings.

The evidence of Roy Meadow has been a common factor in many of the cases. But now, 25 years after it was formulated, his theory has come under suspicion from lawyers and some doctors - not to mention frustrated and bitter parents.

The issue came to the fore earlier this year following the high-profile cases of two British women cleared of charges of murdering their babies. In January, Sally Clark, 39, a solicitor, was freed after spending almost three years in jail for the murder of her two children. Six months later, Trupti Patel, 35, was acquitted of smothering her three babies. A third woman, Angela Cannings, 40, sentenced to life last year for killing her two children, is awaiting an appeal to be heard this month. The prosecution's case in all three instances rested on the crucial evidence of Professor Meadow.

In a scathing attack in the House of Lords recently, the Opposition spokesman on

health, Lord Frederick Howe, described MSBP as "one of the most pernicious ill-founded theories to have gained currency in child care and social services in the past 10 to 15 years." The British Government has asked all prosecutors to identify cases in which Meadow gave (and continues to give) evidence, and to inform the defence.

Even the Prime Minister's wife, barrister Cherie Blair, has joined in, taking the case

of a mother who is barred from seeing her surviving child to the European Court of Human Rights.

However, the controversy is not limited to the now-retired Professor Meadow. One international support group for parents, known as Munched, alleges there is a fraternity of pediatricians who "sing from the same hymn sheet, cherry-picking facts to fit into the theory". In June they staged a protest outside London's High Court, demanding their children be returned and the term MSBP be discarded.

The medical term "Munchausen" was first used in 1951 by Dr Richard Asher to describe adults who fabricated illnesses to get medical attention. Asher named his theory after the 18th-century German soldier Baron Münchhausen, who was renowned for fictional and exaggerated accounts of his travels.

In 1977, Roy Meadow expanded on Asher's original syndrome, identifying a variation, MSBP, a personality disorder whereby parents made their children sick to gain the attention of medical practitioners. Some parents, Meadow proposed, could even go so far as to kill their children.

At the time he was working in the pediatric department of St James's University Hospital in Leeds and had come across two cases which appeared suspicious. In the first, a woman had inserted her own blood into her child's urine sample to skew the result. In the other, a mother had fed her child food with excessive doses of salt, inducing a condition called hypernatraemia which led to the child's death.

The cases were not accidental or careless, according to Meadow, and his findings were published in the medical bible *The Lancet* on August 13, 1977.

The article provoked an avalanche of letters from pediatricians who wrote to him about cases they had observed themselves. In a follow-up paper in 1982, Meadow quoted

the cases he had gathered. Before long he was travelling the world, hammering home his theory to the medical and legal fraternity.

In 1988 his credibility as an expert witness received a boost when he was knighted for

his services to child health.

Over the next two decades, pediatricians and social service officers in Britain, the US, Canada and, later, Australia and New Zealand, would report thousands of cases of MSBP, or "Meadow's law" as it became known. Something in the image of a parent poisoning her child caught the popular imagination, perhaps because it seemed so perverse. Television dramas based storylines on MSBP, depicting, say, a disturbed mother injecting a drug into her child's hospital drip.

There's no doubt that there have been genuine cases, but a growing number of parents began to emerge from the court system alleging that they had been accused

on the basis of fabricated or thin evidence, that they had been "munched".

They also found that once you've been accused of suffering from MSBP, suspicion is always close at hand. That's been the case with Sydney mother Gemma Anderson (not her real name). In May 1991, Anderson gave birth to Marcus - "a big fat happy healthy baby who did everything by the book". Anderson loved motherhood and two years later Joshua was born. A premature baby, he failed to gain weight in his first year, suffered severe reflux and bronchial problems and was in and out of hospital, his condition baffling doctors.

At one stage he was prescribed Cisapride, the controversial anti-vomiting drug which speeds up the passage of food through the oesophagus and stomach, and was banned in Britain in 2000 after causing heart problems.

Joshua's chronic illness was a source of great worry to his mother, but her anxiety gave way to shock when in 1993 she was accused by a pediatrician of deliberately withholding food from Joshua and of forcing her fingers down his tiny throat to make him vomit.

Frantic, Anderson says she pleaded with the pediatrician. "Why would I feed one son and not the other?" she asked.

"Some parents choose to like one child and not the other," she was told. "Maybe you secretly wanted a girl."

Anderson's child was immediately taken away from her by the Department of Community Services (DOCS), and an investigation began into the circumstances

of Joshua's illness. After 10 months, the case went to a civil court hearing, where DOCS alleged that Anderson was harming her son. The magistrate disagreed, finding there was no evidence of MSBP. But a year later DOCS successfully appealed to the District Court.

During all this time, Anderson was allowed to visit Joshua, who had been made a ward of the state, only once a fortnight for an hour. When he started to walk, she was allowed to take him to the park. She launched an appeal of her own, feeling confident that her son would soon be returned to her, but it was not to be. Despite another magistrate finding in her favour, he ruled that Joshua should remain in foster care because of the strong bond he had developed with his "psychological mother".

Worse, Anderson's next child, Amy, who

was born premature and failed to thrive, was also taken away from her. Under the strain,

her marriage broke up. Then in 1998, having conceived again with her new partner, she

gave birth to Emily, 12 weeks premature. But she would never hold her child. On Emily's third day of life two policemen and two

DOCS workers served Anderson with papers assuming care of Emily.

Anderson still has flashbacks of that day.

"I remember [the DOCS worker] saying to me, 'You are never allowed to see her again.'

I just started wailing." She says her breast milk, which had been expressed at the hospital, was tested for contamination. All of it was proven to be clean, but the milk was discarded and Emily put on formula.

Anderson has seen Emily, who was placed in foster care, only once since then, on her first birthday. "It's absolutely devastating. I can see the sadness in her eyes. She is not even sitting up yet." Her partner is allowed an hour-long visit each month and he takes a video camera along each time.

Anderson realises that the original misdiagnosis of MSBP will resonate for the rest of her life. "Two magistrates have found me innocent ... yet I'm still regarded as guilty and a risk. The stigma will never be erased.

It's such an injustice. The doctors and docs workers are unbeatable," she says angrily. "I'm still numb. I'm completely angry that they could destroy my children's lives like this."

In Britain, Michelle and Will Carter's fight to overturn the diagnosis of MSBP since their four children were taken away has left them emotionally and financially exhausted.

They now live in Yorkshire and survive on \$A250 a week, with everything else going towards legal fees. These days Will's most valuable possession is his computer, a gift from his in-laws, which he has used to establish an MSBP support group, and also to help in their Court of Appeal hearing later this year.

They know they have lost their two youngest children, Margaret, now 8, and Rachel, 6, who have been adopted, but they are fighting to have Simon, 14, and Anne, 17, who are in foster care, returned to them.

When they first heard of Meadow's report into their family in 1999, says Will Carter,

"We kept thinking, 'It's all going to blow over. They'll realise it's a mistake', but it just kept going further and further."

The 37-page report accused them of abusing the children by making them endure unnecessary medical tests to gain the attention of hospital staff. Carter admits his children had their fair share of illnesses. All four had asthma and eczema as babies. Margaret and Simon also had milk intolerance, Anne had migraines and bed-wetting problems. Rachel had a protein deficiency. "We did seem to be at the doctors quite a bit, but there was nothing sinister going on."

Meadow also noted that Michelle Carter visited doctors 47 times in a year. But according to her husband, "He failed to mention that during that time my wife was having daily injections at the hospital for anaemia." The report accused them of forcing an object into Margaret's ear to make it bleed, though hospital tests had revealed at the time Margaret

had a severe inner-ear infection.

The day the children were taken away was "probably the hardest day of our lives", Will says. That night his wife tried to kill herself. She has been on antidepressants ever since.

The Carters want to publicise their case to show how destructive the wrong diagnosis can be. They see Anne and Simon on supervised 2 1/2-hour visits four times a year, in a room containing a lounge and a pool table. But they have to live with the fact that they may never see their two youngest children again.

Says Will, "When I'm out and about shopping, I look at children and I hope that one day I'll recognise them. It never leaves you. If I see a child resembling them my heart speeds up. We don't know how much they remember us or whether their new parents have demonised us."

While many of these mothers have been effectively accused of murder, they have

never been charged and have never faced court. In Australia, where a child's safety and wellbeing has been questioned, DOCS says

it is "not mandated to determine who is responsible or why, but whether the child is at risk and if action could be taken to protect the child". Critics counter that the problem with civil or family courts was that they have relied on the word of a single expert. When the case involves children, the expert's evidence is shielded from public scrutiny in order to protect the identity of the child. Unfortunately, there's also a chance that without a jury or a panel of peers reviewing the evidence, a rogue expert need never be brought to account.

Australian medical anthropologist Helen Hayward-Brown, who completed her PhD on MSBP in May, argues that this is what has happened in many supposed cases of MSBP. "In my experience with [these] parents it has become clear that there is no concrete evidence for the MSBP allegations," she says.

In Australia, over a five-year period, Hayward-Brown studied 31 parents whose children had suffered chronic illnesses which had been difficult to diagnose. Of those, 15 had been accused or suspected of MSBP.

She found that mothers branded with the condition had children who were suffering from chronic illness such as reflux, gastric problems or chemical sensitivities - illnesses that doctors had found difficult to treat. Another common link was that the mothers were assertive, questioning, and had come into

dispute with medical practitioners over the treatment their children were being given.

In her thesis, Hayward-Brown found the diagnoses were highly subjective and based

on flimsy probabilities. The technique of "profiling" was used, whereby the evidence was "conveniently edited" to fit the theory.

MSBP came to prominence in Australia about a decade ago and has since developed

a following, Hayward-Brown says. But unlike Britain and the US, which are experiencing a decline in cases due to recent controversy, there is a disturbing and increasing trend to "over-diagnosis" in Australia.

Numbers for Australian mothers accused of MSBP were hard to come by because it was usually recorded under the broad heading of child abuse. In 2000, the Australian Pediatric Surveillance Unit was notified of 26 cases, but Hayward-Brown, who works voluntarily as an advocate for many mothers, believes it runs into the hundreds. "Allegations are becoming more frequent and serious, particularly because, being a small population, medical professionals are less likely to speak out against other doctors. In Britain there are politicians who have voiced their concern about it, but not here."

She found many of the diagnoses were made by a pediatrician who had never met the mother. Two of the mothers she studied were diagnosed by email or mail. Hayward-Brown found evidence of files containing fabrications, and of pathology tests which could help to prove a mother's innocence being ignored.

In many of the hundreds of cases she has examined over the years, even after the child was removed from the mother's care, the chronic illness such as weight loss, reflux or gastric problems continued, suggesting the mother was not to blame.

Hayward-Brown will readily admit that there are cases where parents harm their children. Her problem with MSBP is that she feels the methods being used in its diagnosis leave too much room for error, and that those who label parents as sufferers are unaccountable. She describes it as a "modern-day witch-hunt".

So does MSBP exist? What complicates the issue is that at the heart of many

of the alleged cases is sudden infant death syndrome (SIDS) - a tag that indicates not

a cause of death but an absence of knowledge.

The director of Britain's Foundation for the Study of Infant Deaths, Joyce Epstein, says that it's often not possible to distinguish at post-mortem between smothering and SIDS.

That was the case with the second British woman who overcame a diagnosis of MSBP this year, Trupti Patel. In June, Patel faced trial in London for murdering her children Amar, 13 weeks, Jamie, 15 days, and Mia, 22 days.

Trupti Patel and her husband, Jay, are the archetypal aspiring middle-class family. Trupti has a degree in pharmacy, Jay a degree in physics and electronics. They live in Maidenhead, Berkshire, in a neat semi-detached house.

Up until two years ago they had lived a fairly uneventful life.

In 1995, after an earlier miscarriage, Trupti had given birth to a daughter. The girl, who cannot be named for legal reasons, seemed fine but a few hours later stopped breathing.

A nurse resuscitated her and she is now eight.

Their second child, Amar, was born in 1997. "He was a sweet, laid-back but very hungry boy," Trupti told the court. But 13 weeks later he died. Over the next four years the Patels would bury two more babies. In each case, they said SIDS had claimed the children, but before they could spread the ashes of their last daughter, Mia, a police unit closed in on them, charging Trupti Patel with murder.

Patel's subsequent withdrawal, apparent composure and "coldness", not dissimilar

to Lindy Chamberlain's demeanour when in court over the death of baby Azaria, inclined the Crown to prosecute her. The expert at her trial was Roy Meadow, who told the jury that SIDS does not run in families. In combination, the two things would have sealed her fate, and it was only when her maternal grandmother flew in from India to report on her own loss of five infants to SIDS (which she put down to "God's doing") that the case began to swing her way.

Patel benefited in one way from being charged, in that she, like Sally Clark, had

a public hearing. Clark did spend three years in jail, and could likely have spent more, but an appeal court heard vital medical evidence had been withheld and Professor Meadow's statistics were disputed by the Royal Statistical Society. Meadow had told the court that the chances of Clarke's children dying of SIDS were one in 73 million. The appeal judges, however, stated that this statistic, crucial to Clarke's conviction, was "grossly misleading" and "should never have been put forward at all".

Then, when Patel was acquitted a few months later, there were calls for a review

of hundreds of cases of MSBP in which Meadow had given evidence. When Meadow was asked at the Clarke appeal to produce research papers to justify his original findings on MSBP, he couldn't because he said his secretary had shredded all confidential material when he retired last year.



Penny Mellor, who led the protest outside London's High Court after Patel's acquittal in June, says disgustedly, "This bloody thing was invented out of nowhere and has destroyed so many families." Mellor, who is campaigning

on behalf of hundreds of parents worldwide who she says have been falsely accused, said

it had become a "convenient and fashionable diagnosis". "Doctors don't need evidence. If you are a pushy, questioning parent or if you complain, you risk being munched."

Some of the doctors involved in MSBP

cases - like British pediatrician Professor David Southall, who recommended that seven children be removed from their homes -

now face charges of serious misconduct. The General Medical Council has not set a date for the hearing. Roy Meadow himself faces being struck off. Although the 70-year-old is retired, his evidence is still used in court. But where once he was a vocal crusader for child welfare, he has now fallen silent. He consistently refuses interviews; meanwhile the accusations against him continue. But in a BBC report made about Munchausen earlier this year, he issued a statement in which he sounded unrepentant. "The media," he said, "is more eager to publicise the dangers of perverts in the park than face up to the uncomfortable fact that most child abuse occurs in the home and is perpetrated by the child's parents or carers."

Theory and practice

In Britain, lobby groups are trying to change the way child deaths and child abuse are investigated. They want more joint reviewing of evidence before it is handed over to the prosecution, and a more "open" system. Some would like to see the entire theory of MSBP thrown out.

In Australia, the debate is not as vocal, but it is growing. Colin Morley, professor of neonatal medicine at the Royal Women's and Royal Children's hospitals, Melbourne, wants the label discarded because he believes the diagnosis varies widely and is too non-specific. "It is catchy and I believe used rather casually when people should be doing more to get to the bottom of the problem," he says.

Morley spent several years in the 1990s involved with MSBP cases, and has seen mothers falsely accused. Usually the mother had a child with an illness that the doctor could not diagnose; often the mother was "pushy" and threatening to complain. He has also seen doctors "leap to the diagnosis" without taking a proper history or examination, sometimes having never met the parent or child. He doesn't agree that doctors would fabricate evidence to fit the theory, but says it may sometimes be used as a convenient label.

The head of the Child Protection Unit at the Children's Hospital at Westmead, Dr Paul Tait, said that in practice MSBP was not a condition that one diagnosed by meeting the family: "It is made by careful analysis of the history of the information from many quarters, and this may include interviewing the family to clarify facts."

But he says it is necessary for independent observers to corroborate the evidence.

Tait, who has been involved in a number of cases where MSBP was suspected and even proven by parental admission or conviction, said cases of MSBP were "rare". But he rejects suggestions that doctors are conspiring against women, calling it "a serious misrepresentation of the professional integrity of my colleagues [with] no basis in fact". "We cannot always know whether MSBP is actual or not," he says, "but just as with other cases of suspected abuse, we don't await absolute proof to report these cases to the authority for further investigation."

For Tait, doubts cast on the credibility of Meadow as a medical expert don't necessarily discredit the concept of MSBP. "I am not aware this diagnosis is regarded as a theory any more," he says. "It is in fact widely acknowledged as a reality."

Caption: SEVEN ILLUS: Trial and error?: (clockwise from top) Angela Cannings, now appealing against a life sentence for the murder of her two children; Sally Clark, freed in January after spending three years in jail, outside the High Court with her husband, Stephen; Professor Roy Meadow, the medical expert whose evidence was crucial to their convictions. The Sunday Times; Austral; Camera Press/Austral. "In my experience ... there is no concrete evidence for the allegations": (right) Helen Hayward-Brown's five-year study of Australian parents who were said to have MSBP casts doubt on the diagnosis;

(top) Trupti Patel and her husband, Jay, after her acquittal in June of the murder of three of her children. Austral; Quentin Jones. Some names of families have been changed for legal reasons. Snapper Media; Stephen Baccon (PICTURE POSED BY MODELS)

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