International Supervisory Colloquium of the Case Study of Mrs. Hedviga Malinova

Slovak Institute for Psychotraumatology and EMDR, Trencin, Slovakia
Social Health Institute, Palacky University Olomouc, Czech republic
Psychotraumatology Institute Europe, Duisburg, Germany

Piestany – Spa, Thermia Palace, March 2nd 2013

Programme:

Chairman: Peter Breier M.D., Doc. MUDr. Petr Smolík,CSc

* 9.00-9.20 MUDr. Jozef Hasto,PhD, Mgr. Hana Vojtova: **Case study overview**
* 9.20-9.35 **Discussion**
* 9.35-9.55 Mgr. Hedviga Zakova Malinova: **My experience and perspective**
* 9.55-10.10 **Discussion**
* 10.10-11.00 JUDr. Roman Kvasnica: **Legal and social aspects of the case**
* 11.00-11.30 **Discussion**
* 11.30-14.00 Break
* 14.00-15.30 **Experts´ opinions on diagnostics, therapy and prevention**
* 15.35-16.05 **Press conference**

* Sponsors: Central European Foundation (CEF)
Piestany-Spa
Pro mente sana s.r.o.

* **Peter Breier,M.D.**, psychiatrist a psychotherapist, Consultant Psychiatrist, Community Mental Health Team/ Community Acute Service, Aylesbury, Oxford Health NHS Foundation Trust, UK, **Slovak Republic**
* **Dr. László Haraszti MD** - Head of the Psychiatric Department at Flor Ferenc County Hospital, **Hungary**
* **MUDr. Peter Hunčík**, psychiatrist, the past teacher at the Carleton University, Ottava, **Canada**, **Slovak Republic**
* **MUDr. Peter Korcsog**, psychiatrist, Chief of the Department of Psychiatry Rimavská Sobota, **Slovak Republic**
* **Dr M Timothy Lambert, MB. ChB. FRCPsych**, Chair of the NHS London Section 12 (Mental Health Act) and Approved Clinician Approval Panel and Chair of the S12 National Reference Group. Until 2011, was Consultant in Forensic Psychiatry, Women's Medium Secure Services, and Medical Director at the East London NHS Foundation Trust, **UK**
* **Dr.med Helga Matthess**, Psychotraumatology Institute Europe, vicechair, Trauma Aid Germany, Duisburg, **Germany**
* **Prof. MUDr. Ján Praško, CSc**, psychiatrist, Chief of the Department of Psychiatry, Palacký University, Olomouc, **Czech Republic**
* **Doc. MUDr. Petr Smolík,CSc**, psychiatrist, Charles University Prague, Teaching Hospital Hradec Králové, past WPA Zonal Representative for Central European Countries, **Czech Republic**
* **Doc.Ing.Mgr.Mgr.Peter Tavel Ph.D.**, clinical psychologist, Institute of Social Health, Palacký University Olomouc, **Czech Republic**
* **Prof. László Tringer MD**, prof. emeritus of Semmelweis University, honorary president of Hungarian Psychiatric Association, **Hungary**
* **Dr Maja Turcan, BA, Dip Clin Psychol, Dip Clin Neuropsychol, Doc Clin Psychol**, National Association for People Abused in Childhood (NAPAC), Head of Psychological Therapies in the Women's Services, Forensic Directorate, at West London Mental Health NHS Trust, **UK**
* **János Vizi MD** – psychiatrist, sexuologist and jurist, Chairman of the Supervisory Committee of Hungarian Psychiatric Association, **Hungary**
* **Prof. MUDr. Petr Zvolský, DrSc.**, psychiatrist, Charles University Prague, 1st Medical Faculty, Department of Psychiatry, past WPA Zonal Representative for Central European Countries, **Czech Republic**

The Expert Team

* **Peter Breier, M.D.**, psychiatrist a psychotherapist, UK, **Slovak Republic**
* **Dr. László Haraszti MD** - psychiatrist, **Hungary**
* **MUDr. Peter Hunčík**, psychiatrist, Canada, **Slovak Republic**
* **MUDr. Peter Korcsog**, psychiatrist, **Slovak Republic**
* **Dr.M. Timothy Lambert, MB. ChB. FRCPsych**, psychiatrist, **UK**
* **Dr.med. Helga Matthess**, physisian, psychotherapist, **Germany**
* **Prof. MUDr. Ján Praško, CSc**, psychiatrist, **Czech Republic**
* **Doc. MUDr. Petr Smolík,CSc**, psychiatrist, **Czech Republic**
* **Doc.Ing.Mgr.Mgr.Peter Tavel Ph.D.**, clinical psychologist, **Czech Republic**
* **Prof. László Tringer MD**, psychiatrist, **Hungary**
* **Dr. Maja Turcan, BA, Dip Clin Psychol, Dip Clin Neuropsychol, Doc Clin Psychol, UK**
* **János Vizi MD** – psychiatrist, sexuologist and jurist, **Hungary**
* **Prof. MUDr. Petr Zvolský, DrSc.**, psychiatrist, **Czech Republic**



*The Case Study Overview

Jozef Hasto, psychiatrist, psychotherapist, Trencin
Hana Vojtova, clinical psychologist, psychotherapist, Trencin

* Mrs. Hedviga Malinova granted us her permission to publish all our findings and conclusions

* Thank you

The Case Study

We won´t go into details, but

we would like to present the most important aspects of the case

* You all have received the case study in English
* Electronic and printed version

* The case study itself and our discussion are included in Part II of the article
* POSTTRAUMATIC STRESS DISORDER, BIO-PSYCHO-SOCIAL ASPECTS, EYE MOVEMENT DESENSITIZATION AND REPROCESSING AND AUTOGENIC TRAINING IN PERSISTENT STRESS

*The medical reports

You have at your disposal:

* The discharge summary from the Traumatology Department of the Faculty Hospital in Nitra, Aug. 25, 2006, where Hedviga was admitted after the assault
* Scans from CCT examination showing the facial oedema in the left zygomatic region and in the nose radix

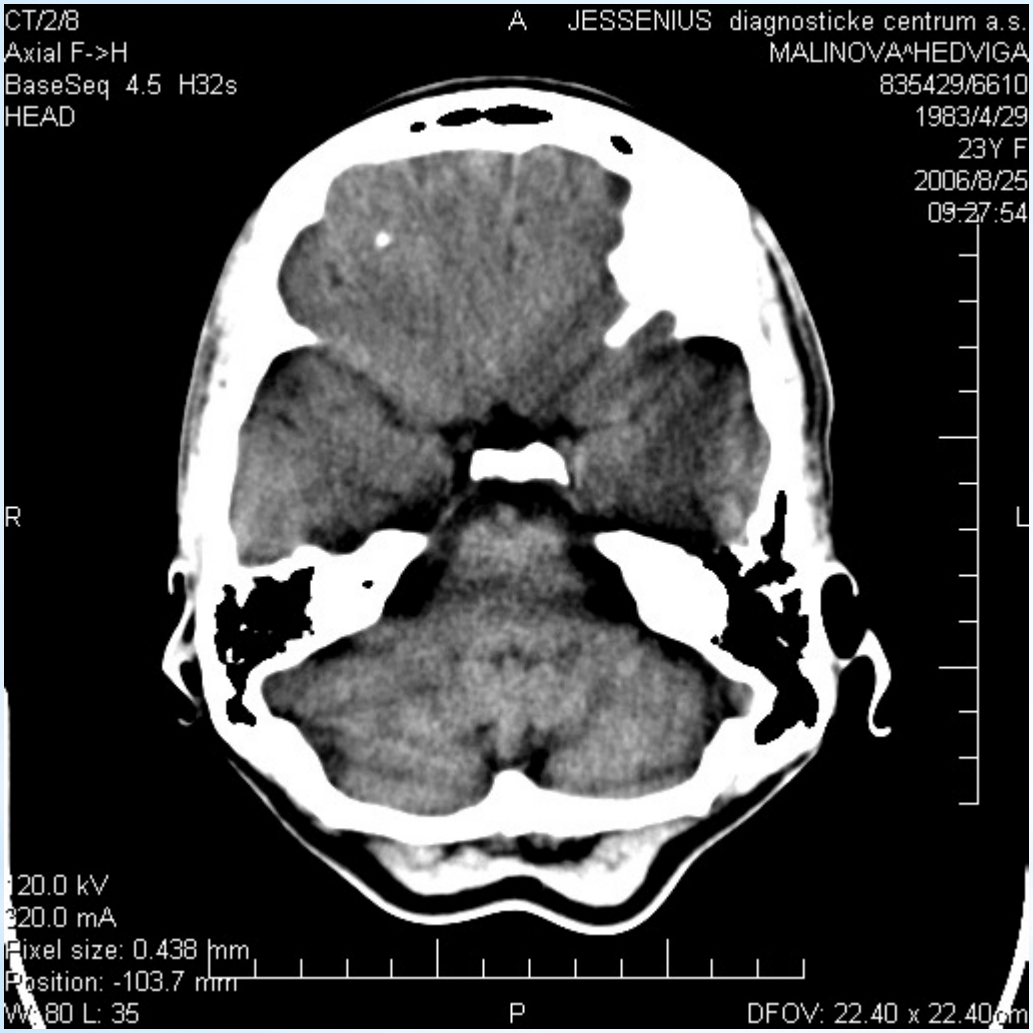
* We received these reports after we had confirmed the diagnosis of PTSD and considered commotio cerebri very probable

CCT scans commentary

* "… there is an oedema of the soft subcutaneous structures in the left zygomatic region - the thickness of the cutis and subcutis in this area is 21mm and 17mm collaterally. Similarly, there is an oedema of the soft cutaneous and subcutaneous structures in the nose radix and facial regions".
* These findings come from a CT evaluation by a highly qualified radiologist and are fully concordant with the clinical findings


CT/2/5
A JESSENIUS diagnosticke centrum a.s.
Axial F->H
MALINOVA^HEDVIGA
BaseSeq 4.5 H32s
835429/6610
HEAD
1983/4/29
23Y F
2006/8/25
09:27:54
R
L
120.0 kV
320.0 mA
Pixel size: 0.438 mm
Position: -116.9 mm
W: 80 L: 35
P
DFOV: 22.40 x 22.40cm

*CCT 1


CT/2/8
A JESSENIUS diagnosticke centrum a.s.
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BaseSeq 4.5 H32s
835429/6610
HEAD
1983/4/29
23Y F
2006/8/25
09:27:54
R
L
120.0 kV
320.0 mA
Pixel size: 0.438 mm
Position: -103.7 mm
W: 80 L: 35
P
DFOV: 22.40 x 22.40cm

*CCT 2


CT/2/3
A JESSENIUS diagnosticke centrum a.s.
Axial F->H
MALINOVA^HEDVIGA
BaseSeq 4.5 H32s
835429/6610
HEAD
1983/4/29
23Y F
2006/8/25
09:27:54
R
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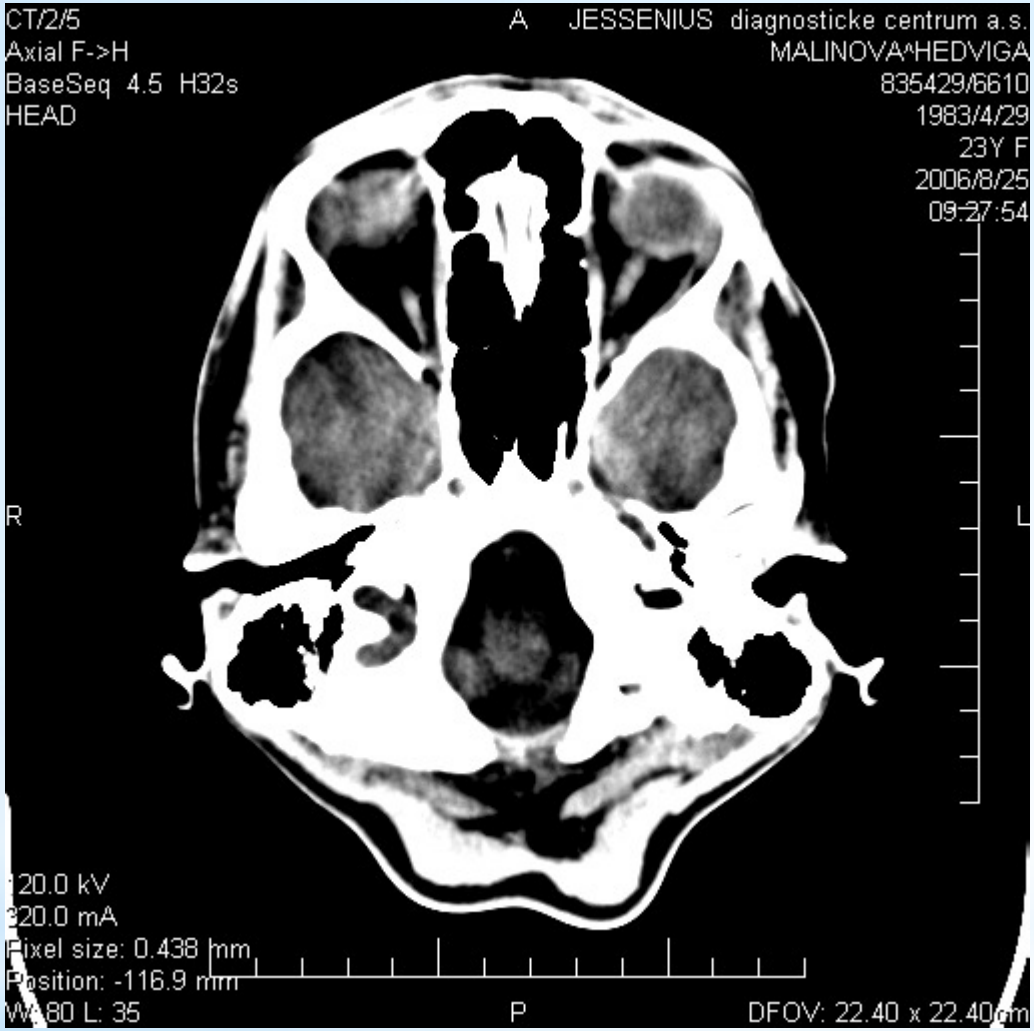
P
DFOV: 22.40 x 22.40cm

*CCT 3


CT/2/5
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MALINOVA^HEDVIGA
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835429/6610
HEAD
1983/4/29
23Y F
2006/8/25
09:27:54
R
L
120.0 kV
320.0 mA
Pixel size: 0.438 mm
Position: -116.9 mm
W: 80 L: 35
P
DFOV: 22.40 x 22.40cm

*CCT 4





*Photos of Hedviga just after the assault

Psychotherapy overview

- Hedviga was referred to Dr. Hasto by Dr. Breier, who was consulted by Hedviga´s lawyer, a few weeks after the assault
- The diagnostic and psychotherapeutic process consisted of overall 47 hour (sessions lasting from 75 to 230 minutes)
- November 2006 to May 2008

Diagnostic process I

* We were open to all differential diagnostic possiblities: simulation, aggravation, arteficial disorder, personality disorder...
* We have not found any evidence for the aforementioned
* We came to a conclusion of a diagnosis of PTSD with following symptoms

Diagnosis of PTSD

- ***Intrusions***: repeated intrusive memories and reliving of the traumatic situation with uncomfortable somatic symptoms; mental distress in situations resembling the trauma;
- ***Avoidance*** behavior: conscious avoidance of thoughts and emotions connected to the traumatic event; conscious avoidance of activities and situations evoking memories of the trauma;
- ***Hyperarousal***: difficulties falling and staying asleep, irritability and attention and concentration deficits;
- Anxiety, helplessness; sadness and crying; anger and disgust connected with the memory;
- ***Amnesia***: inability to remember details of the traumatic event (not explicable by concussion)
  - Full amnesia regarding the strikes which lead to wounds on her nose and her left cheekbone, as well as the following events (15-20 minutes). E.g., why she had haematoma on her thighs or how the assailants wrote on her blouse

Further diagnostic findings

* ***Structured Clinical Interview for DSM-IV for PTSD*** (Margraf 1994): 9 out of 17 symptoms (the diagnostic threshold 6 symptoms) (November 2, 2006)
* ***Impact of Event Scale-Revised*** (IES-R): total score 44 out of 88; clinical cut off score 35 (November 10, 2006)
* ***Degree of disability*** according to the WHO scale (WHO-DS): A=0; B=2,5; C=1; D=2 (November 2, 2006)
  * 0="no disability", 5="serious disability"; A="self-care", B="work", C="family and household", D="broader social context". The evaluation included the past 9 weeks.

* Clinical evaluation of **premorbid personality** and of the personality development (Kind 1997; Dührssen 1998): no premorbid personality disorder
* ***Structured Clinical Interview-II*** (Fydrich et al. 1997): No premorbid personality disorder. The pedantry criterion was partially fulfilled, indicating an accentuation of this personality trait rather than its abnormal form or intensity.
* ***Raven Progressive Matrices Test*** (general intelligence): above average **intelligence**.

Factors influencing health status and contact with health services ("Z codes" of ICD-10)

* Z65.4 Victim of crime or torture (Her freedom of movement was restricted by physical violence; she was forced to unwanted behavior – taking off her clothes and handing in her documents; punches into her face and other body parts; participating in a situation where the consequences of her actions on further violence couldn´t be foreseen; a risk of potential rape – memory loss due to a concussion and fresh haematoma on the thighs)
* Z65.8 Other specified problems related to psychosocial circumstances (Libel from the high political representatives, e.g. from the Prime Minister, Minister of the Interior and the police president; media pressure including disparaging disinformation and attacks in online discussion)
* Z65.3 Problems related to other legal circumstances, e.g. prosecution (She was being prosecuted for alleged perjury by the General Prosecutor´s Office of the Slovak Republic, although the nature of her alleged perjury had never been specified. At the same time, the investigation of the assault was suspended with the explanation that it "did not happen".)
* Z60.5 Target of perceived adverse discrimination and persecution (Verbal and physical assault in context of speaking Hungarian, the statement "Slovak in Slovakia", the sentence "Hungarians behind Danube SK without parasites" found on her blouse after regaining consciousness, the stressful police investigation while she was still in the role of a victim, the role change from "victim" to "perpetrator" according to the General Prosecutor´s Office and the police, disparaging statements from the public, sophisticated intimidation from the unknown trespassers, invasion of the privacy and the hint that her partner might be in danger)
* Z60.8 Other problems related to social environment (She witnessed the suffering of her beloved ones, especially of her parents and partner, because of the problems she had to face but hasn't caused)

The course of psychotherapy I

* Mrs. Hedviga Malinova complied throughout the whole diagnostic and treatment process very well

* Sessions 1-7 ***Stabilisation***: **psychoeducation and guided imagery**, specifically establishing the inner "safe place" and "helper".
* Sessions 8-10 ***Trauma exposure***: **EMDR** (Eye Movement Desensitization and Reprocessing)
  * Before and after each trauma exposure, the client was encouraged to imagine her safe place

The detailed excerpts and desciptions of the trauma-exposure sessions are included in the article Part II (the case study)

The diagnostic aspects were considered throughout the whole process

The course of psychotherapy II

* Sessions 11-25 ***Integration and further stabilisation***: **Supportive interventions and Autogenic training** (Schultz) – basic and higher levels



* Aim: to enhance patient´s
  emotional stability and resilience,
  to improve her stress coping strategies

* Mrs. Hedviga Malinova was exposed to persistent stress throughout the whole course of psychotherapy
  * continued investigation and accusation for alleged perjury according to the line set by the then Prime Minister and Minister of Interior and later the General Prosecutor´s Office: “the deed did not happen”

Therapeutic results

- March 2007
- Almost no PTSD symptoms and didn´t fulfill the PTSD diagnostic criteria (MINI DIPS, Margraf 1994)
- Impact of Event Scale (IES-R): 4
- Degree of disability (WHO-DS): 0 on all the scales

- The patient managed to integrate the psychological traumata into her life

Current situation

- 6 years after the assault, Mrs. Hedviga Zakova Malinova and her family have been under the pressure of state (government) bodies and prosecutors
- Currently, the same Prime Minister and Minister of Interior are in power
- The former government of Prime Minister Radicova announced a public apology to Mrs. Zakova Malinova (2011), in response to the agreement with the European Court for Human Rights in Strasbourg.

Current „Kafka situation“

- Recently, Mrs. Hedviga Zakova Malinova is under pressure from the expert witnesses, forensic psychiatrists and clinical psychologists
- In case she would not cooperate with the expert witnesses, she is threatened with involuntary hospitalization for purposes of observation
- So far the expert witness reports, including the medical ones, were clearly manipulated and false
  - For example, in his report the Professor of Surgery and the Dean of the Medical Faculty of Comenius University in Bratislava disregarded clinical evidence of the head injury confirmed by CCT examination as well as the diagnosis of brain concussion, acute stress and PTSD

Purpose of the Colloquium

* We believe that your unprejudiced expert supervision of our clinical findings and validity of our diagnostic and therapeutic process resulting in an expert opinion could work as a professional and moral counterbalance against an enticement of the government bodies to continue in the misuse of power and in manipulation of the case, even more so now, when the expert witnesses, psychiatrists and psychologists are being involved in the manipulation.

* We welcome all your questions and feedback

*Thank you for your attention