EPILEPSY AND PSYCHOSIS: WHEN NEUROLOGY AND PSYCHIATRY COME TOGETHER

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Psychotic disorders are severe mental disorders that occur with changes in thinking and perception, with repercussions at personal and social levels. It is estimated that 2-9% of epileptic patients suffer from psychotic disorders. Although pathophysiological mechanisms remain unclear and psychiatric presentation may look similar to idiopathic schizophrenia, there are important clinical distinctions. There are various proposed classifications, the most consensual is performed according to their temporal relationship with the seizure itself.

We present the case reports of two patients, a 56-year-old male and a 57-year-old female, with longterm temporal lobe epilepsy due to hippocampal sclerosis. Both had frontal and temporal lobes dysfunction in neuropsychological assessment, and they were referred to psychiatric consultation for behaviour changes and important psychotic symptoms. The male patient maintained a pattern of occasional complex partial seizures, showing a steady psychotic state with a good initial response to antipsychotic therapy. The female patient maintained frequent complex partial seizures even after progressive adjustment of anti-epileptic medication, culminating in right amygdalohippocampectomy. She experienced progressive worsening of psychiatric symptoms, with acute exacerbations that prompted several hospital admissions.

Our aim is to draw attention to the prevalence of psychiatric disorders, particularly psychosis, affecting patients with epilepsy. These contribute to lower quality of life in these patients, and have a significant burden in society. We consider it is important to distinguish the different types of associated psychosis, not only to improve approach and therapeutic management, but also because it would contribute to the understanding of the pathophysiology of other primarily psychiatric disorders.