

groups for efficacy, safety, and adverse effects, although they can cause serious and undesirable side effects.

Objective. Report of a series of cases of patients with SIAHS secondary to the use of SSRIs.

Materials and Methods. We report 21 cases of patients between 52 and 76 years of age, of both sexes, undergoing treatment for depressive disorder with SSRI antidepressants and anxiolytics, concomitant with other clinical treatments (ACEI, thiazides, and carbamazepine). Biochemical laboratory and electrocardiogram studies were performed prior to the start of treatment.

Results. In the first weeks (mean = 2.5) after starting psychopharmacological treatment, hyponatremia (mean = 126 mEq/L) was recorded in 9 symptomatic patients, and Inadequate Antidiuretic Hormone Secretion Syndrome (SIAHS) was diagnosed with referral to Nephrology and Endocrinology. The SSRI was withdrawn, achieving normalization of the biochemical values (plasma and urinary sodium, plasma, and urinary osmolality), psychotherapy was reinforced until the rotation of another antidepressant. The mean time of suspension of the antidepressant was 7.1 days, the time of disappearance of symptoms after the suspension was 4.3 days and the normalization of biochemical values was 21.68 days. Only one case was severe and 5 required hospitalization.

Conclusions. In the cases presented, the SSRI antidepressants were associated with hyponatremia caused by the syndrome of inappropriate antidiuretic hormone secretion. This adverse event was more significant in elderly patients and in those treated with other drugs that cause the disease, such as antineoplastic, diuretic, and antiepileptic drugs, due to synergism between the causative mechanisms.

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Keywords: Antidepressants SSRIs; Hyponatremia; Syndrome of inappropriate antidiuretic hormone secretion

Social Cognition and Behavioral Variant of Frontotemporal Dementia: Evaluative Utility for the Health and Forensic Field

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Abstract

Introduction. The behavioral variant of frontotemporal dementia presents clinical specificities and difficulties for its early diagnosis in the initial stages due to the overlap of symptoms with other psychiatric pathologies. The delay in diagnosis places the subject in a state of vulnerability because the treatment will not be adequate and the alteration in the psycho-functional capacity can expose him to risks.

Objective. The objective of this research was to describe the importance at the forensic and health level of the neuropsychological evaluation of social cognition in people with behavioral variant frontotemporal dementia and to correlate the results with the clinical manifestations of the patients.

Materials and Methods. Forty-five patients with behavioral variant frontotemporal dementia were studied with social cognition tests (Reading the Mind in the Eyes and Faux Pas Tests) and staged with standardized scales (CDR [Clinical Dementia Rating], GDS [Global Deterioration Scale], and the FTD-FRS [Frontotemporal Dementia Rating Scale]). The results were analyzed with descriptive and inferential statistical tests and the current ethical-legal requirements were met (requirement of informed consent, reservation of the identity of the participants, compliance with the GCP-Good clinical practice-, ANMAT provision 6677/10 and adherence to the Ethical Principles derived from the Declaration of Helsinki).

Results. We found a significant prevalence of alterations in social cognition tests, mainly in Faux Pas Test, from the initial stages of the disease, which were correlated with the clinical stage of the patient.

Conclusions. The behavioral variant of frontotemporal dementia is a condition with significant diagnostic complexity in its initial stages that affects decision-making, the type of treatment to be instituted and presents the consequences for the subject and their environment. Early detection with a deep assessment of social tools will provide clinical tools for pharmacological treatment, as well as to know the capacity and safeguard the rights of the subject and implement the necessary support measures. It was confirmed that the alterations in the social cognition tests were correlated with the clinical stage in the FTD-FRS scale and high implication in the results of the Faux Pas Test mainly, and secondarily in the Reading the Mind in the Eyes Test.

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Keywords: Behavioral variant frontotemporal dementia; Social cognition; Capacity; Pharmacotherapy

Efficacy, Tolerability, and Safety of Atypical Antipsychotics in East Asian Ethnicity

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Abstract

Background. A number of intrinsic (age, gender, physical comorbidities, genetic factors, and ethnicity), and extrinsic factors (diet, concomitant medications, alcohol use, and smoking) influence an individual's response to psychotropic medications. Data suggest that ethnicity may affect medication efficacy, tolerability, and safety through different pharmacokinetics and pharmacodynamics. Asians have been found to have a high frequency of reduced function of CYP2D6 allele (CYP2D6*10), which contributes to the slower metabolism of some medications compared to other

ethnic groups. The previous study has shown East Asians appear to have a clinically relevant decrease in clozapine clearance compared with Caucasians. This review will explore the magnitude of the impact of ethnicity, especially the East Asian population on psychotropic medications such as atypical antipsychotics.

Objective. To understand the efficacy, safety, and tolerability of atypical antipsychotics in East Asian ethnicity. To emphasize the importance of ethnicity in clinical practice while offering/prescribing atypical antipsychotic medications.

Discussion. Several previous studies reported the diverse response to the antipsychotics among different ethnicities secondary to differences in pharmacokinetics and pharmacodynamics. One study revealed White Europeans may require higher doses of therapeutic antipsychotics than Asians and Hispanics. Aripiprazole in Asians had a relatively higher rate of akathisia, and a significantly increased risk of tremor compared to placebo. A significantly increased risk of weight gain and fasting total cholesterol from olanzapine were observed in Japanese patients. Olanzapine was also associated with somnolence and dizziness. Quetiapine XR was associated with a significant increase risk of somnolence and dizziness in Chinese patients.

Conclusion. It is indicated from previous studies antipsychotics respond in various ways in different ethnicity in terms of metabolism, clearance, and adverse effects. Further research could be beneficial on what is clinically most effective dosing of different antipsychotics among different populations including East Asians.

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COVID-19 Induced Psychosis in Patients with Underlying Mental Health Disorder: Case Report

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Abstract

The COVID-19 pandemic confronted the world with an unknown reality whose challenges extend beyond the immediate threat to human health posed by the virus itself. Numerous stressors such as fear of the disease gravity and absence of proper treatment protocols, prolonged social isolation, anxiety, and financial burden lead to increased risk of developing psychiatric disorders in patients with underlying mental health problems. We present a case of a 23-year-old female, with a history of anxiety and depression who presents with psychosis and mania after contracting 2019 novel coronavirus. The patient was asymptomatic for the infection. The purpose of this case report is to highlight the fact that COVID-19 can increase the risk of mania and new-onset psychosis in patients with a previous psychiatric history.

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Psychosocial Stressors and Phase of Life Problems as a Cause of Somatic Symptom Disorder in Healthy Patients: Case Report

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Abstract

Knowledge about the aging process and in particular changes affecting mental health in the elderly has been gradually acquired as more research studies focus on this topic. However, as the majority of studies are geared toward more commonly encountered mental health disorders such as depression and anxiety, there is less data for conditions that are encountered less frequently such as somatoform disorder. We present the case of a 62-year-old male who presents with idiopathic physical symptoms not explained by any medical conditions except somatic symptom disorder. A comprehensive review of the literature using databases, such as PubMed, NCBI, and Google Scholar was conducted to gain a better understanding of this specific disorder and to rule out similar conditions that present in a similar way. The purpose of this case report is to emphasize the fact that social stressors and phase of life problems could trigger somatic symptom disorder in otherwise healthy individuals.

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Effects of Long-Term Deutetrabenazine Treatment in Patients with Tardive Dyskinesia and Underlying Psychiatric or Mood Disorders

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