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Alpha-thallasaemia Zero and Schizophrenia – a Case Report and Discussion.

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Introduction:

A 28 year old Malawian man, experiencing his first psychotic episode and subsequently diagnosed with Schizophrenia was also identified as having Alpha-Thalassaemia Zero Trait (ATZT). This poster will include the aetiology of his presentation, chromosomal basis of both illnesses and the possible link between psychosis and thalassaemia.

Methods:

Case-report, Literature review and Discussion.

Results:

Mr.X was admitted via A&E after walking through a pane of glass and leaping from the roof of his home. He had a 3-year history of social withdrawal, religious obsession and increasingly bizarre behaviour. This progressively worsened the week prior to his admission. He refused to leave his house, became paranoid about being attacked, did not eat or drink, and walked around naked. He presented with paranoid, persecutory delusions, third person auditory hallucinations and poor insight. He was treated with Risperidone and recovered well.

Discussion:

To the best of our knowledge, this is the first case report on Schizophrenia in a person with ATZT in the UK. We propose that ATZT may have been associated with the development of Schizophrenia. Our literature review revealed studies that suggested micro-deletions on Chromosome 16 increased the risk of Schizophrenia as well as ATZT. We hypothesise that the presence of one abnormality on Chromosome 16 increases the likelihood of other chromosomal abnormalities leading to the risk of developing Schizophrenia.

Conclusion:

Further studies are required on the prevalence of schizophrenia in those with ATZT. We recommend increased awareness amongst clinicians about the potential risk of Schizophrenia associated with ATZT.