

P01-387 - **BIPOLAR AFFECTIVE DISEASE AND AIDS - CONCERNING A CLINICAL CASE**

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The Human Immunodeficiency Virus infects primarily the immune system. However, the infection may also affect the central nervous system, materialising itself, in this particular case, in neurological and neuropsychiatric disturbances.

The authors describe the case of a 48 year-old female patient with bipolar affective disease, identified since she was 21. She has a long history of regular examination in speciality consultations, including several psychiatric hospital stays. More recently, she is conducted to the psychiatric emergency department, being admitted for a maniform state. During the stay her general condition deteriorates progressively, being often taken to the regular emergency department. The serious weight-loss associates itself to altered states of consciousness, ataxia and disartry, as well as diahrrea, fever syndromes and breathing difficulty. As a consequence, the patient stays in bed. Despite several diagnosed infections and the histologic result of the cervical cancer biopsy, requested in an ambulatory regime ("lymphoproliferative disease involving the cervix"), she is always conducted to the psychiatric ward. She is admitted in the medicine ward only a month later and is, afterwards, transferred to the infectious diseases ward, with the aim of studying the neuropsychiatric condition in connection with the HIV/AIDS infection.

The authors come to the conclusion that, it is rather important that the anti-HIV antibodies research is included in the routines of complementary diagnosis examinations requested by psychiatrists.

They also reflect about the little relevance that other medicine areas give to the physical diseases of the psychiatric patients, weakening them even more.