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The Significant Role of Consultation Psychiatrist in Preventing, Identifying and Treating Wernicke's Encephalopathy

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Introduction: Wernicke's encephalopathy is an acute neuropsychiatric disorder which occurs as a direct result of a thiamine deficiency. Prevalence of Wernicke's encephalopathy is 1.4-2.2 % in the general population with an increased rate in known alcoholics of 12.5 %, and 35% in alcoholics with cerebellar damage. Wernicke's encephalopathy is missed on clinical examination in up to 75-80% of cases and only verified on autopsy. Thiamine deficiency can occur due to either alcoholic or nonalcoholic causes.

Objectives:

- 1. Early and adequate intervention may **prevent** the development of Wernicke's encephalopathy.
- 2. Early **detection** of Wernicke's encephalopathy is crucial in preventing the severe neuropsychiatric complications that may result.
- 3. Aggressive **treatment** with high dose thiamine may reverse symptoms of Wernicke's encephalopathy and prevent the progression to Korsakoff's syndrome.

Aims:

1. Adequate and early prevention and treatment **reduces** morbidity and mortality associated with Wernicke's encephalopathy.

2. Proper medical intervention significantly decreases the length of stay.

3. By preventing progress of Wernicke's encephalopathy to Korsakoff syndrome, the cost of care can be significantly **diminished**.

Methods: We present a case series of patients with Wernicke's encephalopathy that were identified and treated by consultation-liaison psychiatrist and review of relevant literature.

Results: Seven patients were diagnosed with Wernicke's encephalopathy. All patients were aggressively treated with high dose IV thiamine. All patients improved and were discharged in a stable condition. None of them progressed to Korsakoff.

Conclusions: The role of psychiatry in preventing, identifying, treating Wernicke's encephalopathy and educating the primary team had significant impact on improving patient's care and prognosis.