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PSYCHIATRIC DEVELOPMENT IN HUNTINGTON DISEASE

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Huntington Disease (HD) is an untreatable condition with an hereditary basis, autosomal dominant, progressive and Neurodegenerative, with average beginning age in-between 35 and 44 years old. Choreic movements are the major feature of this disease, but the most precocious symptoms are psychiatric alterations. Studies reveal depression numbers to be double than those found in the general population, with disturbing numbers in suicide attempts. Behavioural alterations (psychotic symptoms, agitation, irritability, and insomnia) may become severe in long-term course.

Objective: The authors' aim is to approach the different psychiatric manifestations in HD, and Psychiatry's role in afflicted families.

Methods: The authors undertake a revision of this topic in the literature.

Conclusion: Familiar history is underestimated, and in the course of the disease, antidepressive treatments are underutilized. Atypical antipsychotic with minimal extrapyramidal side effects are welcome on motor as well as behavioural symptoms. Family counselling and psychological support is key.