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THE INTERFACE NEUROLOGY-PSYCHIATRY: A CASE REPORT OF FRONTO-TEMPORAL DEMENTIA

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The authors describe case of a male of 48 years old admitted in an acute psychiatric unit with psychomotor restlessness, temporal disorientation and severe distractibility, although prior to the admission he had shown symptoms of apathy and social retraction suggesting a depressive syndrome. This was a patient without prior psychiatric history, with a good psychosocial functioning and well adjusted prior personality. Within one year, there was a change in his personality and the appearance of an inadequate social conduct, with an insidious onset and gradual progression. CT scan and MRI showed lobar fronto-temporal atrophy. The SPECT showed also changes consistent with a fronto-temporal dementia. During the admission he manifested hyperactivity, some disinhibition, mental rigidity, inflexibility, stereotyped behaviors and persevering with continuous walking and changes in eating habits, alternating severe anorexia with hyperphagia. He also presented distractibility, poor speech with loss of spontaneity, an indifferent attitude, emotional flattening and lack of insight for his condition. In the neuropsychological evaluation initially existed only prejudice of the frontal lobes functions, with preservation of other cognitive functions, but gradually evolved. Addressing to the therapy, it were used various drugs, including SSRI's, that until now have not proved to be effective in controlling the symptoms, highlighting the difficulty in the psychopharmacological approach of FTD.