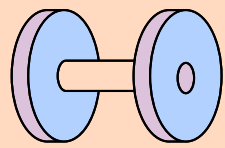




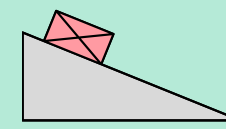
A CASE REPORT OF THYROTOXICOSIS INDUCED PSYCHOSIS

BY GRACIELLE FRANCE I. RIVERA



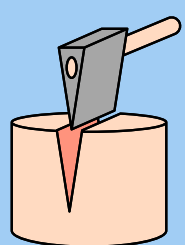
ABSTRACT

The first step in the assessment of a patient who presents psychiatric symptoms is to discard somatic illness. This is a case of a 15 year old patient whose symptoms began with confusion, behavior alterations and agitation, which were followed by psychomotor inhibition with visual hallucinations, with underlying thyrotoxicosis. Psychosis and mood symptoms secondary to hyperthyroidism are rare.



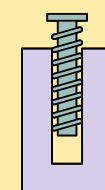
OBJECTIVES

- 1.To present a case of Thyrotoxicosis Induced Psychosis in an adolescent in the Philippines
- 2.To discuss the diagnostic modalities that may help in the diagnosis and the proper and timely management of Thyrotoxicosis Induced Psychosis



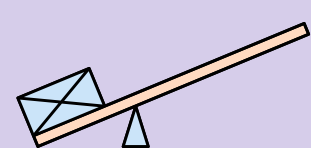
CASE REPORT

A case of a 15-year-old female who presented to the out-patient department with psychotic features and anterior neck mass. She had excessive agitation, paranoia, mood swings and hyperactivity. She also had insomnia and intermittent hypersensitivity reactions. She was admitted to the inpatient care, and laboratory investigations were significant for a very low thyroid-stimulating hormone, and markedly elevated T3, T4, thyroid hormones.



DISCUSSION

This case confirms that acute psychiatric symptoms in patients with thyrotoxicosis can resolve without the introduction of antipsychotic drugs. However, we recommend psychiatric review to determine whether temporary treatment with antipsychotics is indicated in individual cases. In the assessment of patients with either a newly diagnosed psychosis or relapse of a psychiatric condition, questions about symptoms of thyrotoxicosis or hypothyroidism should be included in the assessment. Screening for thyroid dysfunction in patients with acute psychosis and no previous diagnosis of a psychiatric disorder has minimal cost-far outweighed by the risk of misdiagnosing a psychiatric problem, thereby avoiding unnecessary and potentially long-term antipsychotic therapy. Treatment with a thionamide and beta-blocker may be sufficient, but this needs careful assessment on a case-by-case basis in close liaison with the psychiatry team.



FINDINGS

Wayne's Criteria was used to assess the accuracy of hyperthyroidism symptoms and revealed a score of 25 interpretations of which falls under thyrotoxicosis. Burch and Wartofsky tool was used for the assessment of probable Thyroid storm and patient's score was 55, which falls for impending storm. A provisional diagnosis of Hyperthyroid induced Psychosis and Thyrotoxicosis was established.