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**EPILEPTIC SEIZURES OR PSYCHOGENIC NONEPILEPTIC SEIZURES? WHEN THE BORDER MIND-BODY BECOMES THIN. A CASE REPORT**

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The pseudoseizures are also called 'psychogenic non-epileptic seizures' (PNES) resemble epileptic seizures (ES) but are not caused by abnormal electrical discharges without pathological changes in EEG.

So there is a high risk of misdiagnosis, inappropriate and ineffective treatments.

Many studies have shown a significant correlation among trauma, stories of childhood abuse, posttraumatic stress disorder (PTSD) and diagnosis of PNES.

This paper aimed to examine clinical features of a patient with a complex clinical picture characterized by a typical symptoms of PTSD (intrusive experiences, avoidance, numbing, and hyperarousal) comorbid with PNES.

According to this purpose, the patient was subjected to thorough psychological assessment, that included the usage of projective, cognitive and neuropsychological battery tests. Referring to international studies, the MMPI-2 can be a valuable and accurate tool for the differential diagnosis between epileptic seizures and psychogenic non-epileptic seizures.

The scores on the Ps-Pk scales (T88-T82) direct to the PTDS diagnosis and the elevation Hy (T 69), Hs (T73), Sc (T 74) and D (T 70) scales orient to hypothesis of psychogenic non-epileptic seizures.

This results are in continuity with other international studies, emphasizing that traumatic experiences and the social background have a strong weight in the development of these seizures.

Ultimately, we are confident that we will be able to classify patients with ES and NES large accuracy using psychometric and psychosocial variables, especially when the border mind - body becomes so thin.