
ACUTE ONSET OF MANIC EPISODE INDUCED BY DEXAMETHASONE IN A PATIENT WITH ATOPIC DERMATITIS.

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Introduction: The corticosteroid-induced neuropsychiatric symptoms may occur at any time of corticosteroid use and include depression, mania, psychosis and delirium.

Objectives: To present corticosteroid-induced neuropsychiatric symptoms of patient with atopic dermatitis.

Aims: A case report of acute manic episode induced by a short course of dexamethasone.

Methods: A thirty-six year old female was referred to the Department of Dermatology and Venereology, Medical University of Lodz because of insufficient clinical improvement of a treatment regimen ordered, and due to psychiatric problems associated with the use of dexamethasone.

Results: History of any other skin disease, psychiatric problems or internal disorder was not relevant. After two days of treatment with dexamethasone 8 mg, the patient developed progressively increasing symptoms of psychomotor agitation, elevated mood, distractibility and early waking up. Six days later she started to experience increasing sensitivity to acoustic stimuli, startle response, feeling of being almighty and anxiety. On the ninth day dexamethasone was withdrawn. After a psychiatric consultation she was prescribed sodium valproate from 75 mg to 300 mg. The patient was also taking perazine 25 mg in the evening together with valproate. All the symptoms resolved two weeks after administration of antipsychotic treatment.

Conclusions: Understanding the neurobiological mechanism involved in glucocorticoid-induced affective disorders is crucial for effective prevention and treatment of these complications. Further studies are needed to elucidate if patients with atopic dermatitis represent a special risk group considering psychiatric complications of systemic steroid treatment.