

groups for efficacy, safety, and adverse effects, although they can cause serious and undesirable side effects.

Objective. Report of a series of cases of patients with SIAHS secondary to the use of SSRIs.

Materials and Methods. We report 21 cases of patients between 52 and 76 years of age, of both sexes, undergoing treatment for depressive disorder with SSRI antidepressants and anxiolytics, concomitant with other clinical treatments (ACEI, thiazides, and carbamazepine). Biochemical laboratory and electrocardiogram studies were performed prior to the start of treatment.

Results. In the first weeks (mean = 2.5) after starting psychopharmacological treatment, hyponatremia (mean = 126 mEq/L) was recorded in 9 symptomatic patients, and Inadequate Antidiuretic Hormone Secretion Syndrome (SIAHS) was diagnosed with referral to Nephrology and Endocrinology. The SSRI was withdrawn, achieving normalization of the biochemical values (plasma and urinary sodium, plasma, and urinary osmolarity), psychotherapy was reinforced until the rotation of another antidepressant. The mean time of suspension of the antidepressant was 7.1 days, the time of disappearance of symptoms after the suspension was 4.3 days and the normalization of biochemical values was 21.68 days. Only one case was severe and 5 required hospitalization.

Conclusions. In the cases presented, the SSRI antidepressants were associated with hyponatremia caused by the syndrome of inappropriate antidiuretic hormone secretion. This adverse event was more significant in elderly patients and in those treated with other drugs that cause the disease, such as antineoplastic, diuretic, and antiepileptic drugs, due to synergism between the causative mechanisms.

Funding. No funding

Keywords: Antidepressants SSRIs; Hyponatremia; Syndrome of inappropriate antidiuretic hormone secretion

Social Cognition and Behavioral Variant of Frontotemporal Dementia: Evaluative Utility for the Health and Forensic Field

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Abstract

Introduction. The behavioral variant of frontotemporal dementia presents clinical specificities and difficulties for its early diagnosis in the initial stages due to the overlap of symptoms with other psychiatric pathologies. The delay in diagnosis places the subject in a state of vulnerability because the treatment will not be adequate and the alteration in the psycho-functional capacity can expose him to risks.

Objective. The objective of this research was to describe the importance at the forensic and health level of the neuropsychological evaluation of social cognition in people with behavioral variant frontotemporal dementia and to correlate the results with the clinical manifestations of the patients.

Materials and Methods. Forty-five patients with behavioral variant frontotemporal dementia were studied with social cognition tests (Reading the Mind in the Eyes and Faux Pas Tests) and staged with standardized scales (CDR [Clinical Dementia Rating], GDS [Global Deterioration Scale], and the FTD-FRS [Frontotemporal Dementia Rating Scale]). The results were analyzed with descriptive and inferential statistical tests and the current ethical-legal requirements were met (requirement of informed consent, reservation of the identity of the participants, compliance with the GCP-Good clinical practice-, ANMAT provision 6677/10 and adherence to the Ethical Principles derived from the Declaration of Helsinki).

Results. We found a significant prevalence of alterations in social cognition tests, mainly in Faux Pas Test, from the initial stages of the disease, which were correlated with the clinical stage of the patient.

Conclusions. The behavioral variant of frontotemporal dementia is a condition with significant diagnostic complexity in its initial stages that affects decision-making, the type of treatment to be instituted and presents the consequences for the subject and their environment. Early detection with a deep assessment of social tools will provide clinical tools for pharmacological treatment, as well as to know the capacity and safeguard the rights of the subject and implement the necessary support measures. It was confirmed that the alterations in the social cognition tests were correlated with the clinical stage in the FTD-FRS scale and high implication in the results of the Faux Pas Test mainly, and secondarily in the Reading the Mind in the Eyes Test.

Funding. No funding

Keywords: Behavioral variant frontotemporal dementia; Social cognition; Capacity; Pharmacotherapy

Efficacy, Tolerability, and Safety of Atypical Antipsychotics in East Asian Ethnicity

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Abstract

Background. A number of intrinsic (age, gender, physical comorbidities, genetic factors, and ethnicity), and extrinsic factors (diet, concomitant medications, alcohol use, and smoking) influence an individual's response to psychotropic medications. Data suggest that ethnicity may affect medication efficacy, tolerability, and safety through different pharmacokinetics and pharmacodynamics. Asians have been found to have a high frequency of reduced function of CYP2D6 allele (CYP2D6*10), which contributes to the slower metabolism of some medications compared to other