

P01-378 - DEMENTIA IN A YOUNG MAN WITH NEUROSYPHILIS

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The paper presents the case of a young patient with a syndrome deteriorativ quickly installed and that does not respond to psychostimulants and psychotropic medication, but quickly responded to high doses of Penicillinum G.

Case report: We present a 43 years old men discharged from an internal medical service where the diagnosis of liver cirrhosis was refuted and confirmed the hepatitis C disease.

Onset is 6 months ago with cognitive deterioration and behavioral problems, confusional episodes, importante memory disorders. Symptomatology was exacerbated in the last two months.

CT Moderate cerebral atrophy

EEG revealed generalized arrhythmic slow activity;

Laboratory tests : VSH 36-mm/1h ,WBC 13.6-10-3/mm 3.

HIV test negative .

VDRL quantitative 1/1- + + + + , 1/2- + + + + , 1 / 4 + + + + , 1 / 8 / + + + + , 1/16- + + + , 1/32- +

THPA (positive reaction) -dil-1/80;

VDRL in CSF positive + + + +

Results: Patient was treated with a high dose of penicillin G intramuscularly . The clinical symptoms improved significantly in 2 weeks and MMSE increased from 12 to 22.

Conclusion: Syphilis and its complications must be still in medical attention. If there is cognitive dysfunction or brain atrophy of unknown cause, neurosyphilis should be considered. Treponema infection should be part of the differential diagnosis of each patient showing cognitive deterioration and behavior disturbances.

References:

1. Garber SJ, Christmas TJ, Rickards D: Voiding dysfunction due to neurosyphilis. Br J Urol 1990;
2. Walter GB, Robert BD, Gerald MF, et al: Neurology in Clinical Practice, 4th ed. Philadelphia, Butterworth-Heinemann, 2004