Clinical Characteristics of AD and Case Reports (PP-5/2)

DECELERATION OF ALZHEIMER DISEASE WITH EARLY-ONSET

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In 2006 at the time of onset, a 58 year old patient had symptoms of cognitive deficit, anxiety, irritability, wondering. CT scan showed a mild cerebral atrophy and the diagnosis of psychoorganic syndrom was established.

Due to the worsening of the symptoms the patient was hospitalized in psychiatric department in 2008. At the admission Mini Mental State Examination (MMSE) was 23 points and CT findings showed the progression of mild to moderate cerebral atrophy. The diagnosis of Alzheimer disease (AD) was established according to the International Classification of Diseases Tenth Revision (ICD-10) and Diagnostic and Statistical Manual of Mental Disorders - Fourth Edition - Text Revision (DSM-IV-TR). During the first hospitalization the patient was taking tianeptine 37.5mg/day, oxazepam 30 mg/day and zolpidem 5mg/night per need.

This therapy was administered without interruption for one year and his mental state was stable. But after one year the worsening of tension, impulsivity and loss of interest was noted, and paranoid interpretations and night delirium episodes occurred.

Due to worsening of the above mentioned symptoms the patient agreed voluntarily to participate in the study protocol for the examination of a new potential antidementive drug. During the participation in the study his cognitive status was unchanged, night delusional episodes disappeared and paranoid interpretations were reduced. MMSE status was 24 points in 2013.

After finishing the study protocol with success the patient started therapy with donepezil 5mg/day for three years. After that period the patient participate in new study protocol for antidementive drug. MMSE was 24 points in 2016.

During all ten-years of AD treatment the patient was five time hospitalized in psychiatric department, in short periods, mostly due to dementia behavioral symptoms.

Although our patient had early-onset Alzheimer disease, which is a poor prognostic factor, this case study has demonstrated that early recognition and timely antidementive treatment (standard and experimental drugs) can slow down the progression of AD. Moderating devastating effects of AD has multiple benefits for patients and society as a whole.