

CORTICOSTEROID-INDUCED MANIA TREATED WITH RISPERIDONE - A CASE REPORT

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Introduction: Corticosteroids have either somatic and psychiatric side effects. Somatic adverse effects are well described while neuropsychiatric have received less attention. Psychiatric symptoms such as depression, psychosis and especially mania are common side effects of corticotherapy.

Aims and objectives: Describe a case of a 53 year old female patient, with no psychiatric history, who developed psychiatric symptoms during the treatment of an acute exacerbation of multiple sclerosis with large parenteral doses of corticosteroids. Three days after the onset of corticotherapy she developed increased energy, elevated mood, increased motor activity, racing thoughts, and diminished need for sleep. She subsequently developed grandiose and persecutory ideation and then feared her grandson was going to die. This led to her admission to psychiatric unit of our hospital to address these behavioral problems. Her husband noticed that she had become "hyper" in the past when she received pulse corticosteroid therapy, but the most recent episode was by far the worst.

Methods: Revision of the scientific literature through *Pubmed*, *Embase* and *Psycinfo* using search terms including corticosteroids, mania, depression, psychosis and mood.

Results: Prednisone was suspended and Risperidone 2mg was begun for presumed steroid-induced mood disorder, and the patient became calmer and much less guarded over the next 2-3 days. After a week she recovered complete euthymic mood and reverted to normal functioning.

Conclusions: These data suggest that Risperidone is well tolerated and appears to be useful for mood disturbances associated with corticosteroid therapy. Controlled trials seem warranted to confirm these observations.