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Case Report

Bipolar disorder and heart transplantation: A case report*



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ABSTRACT

Introduction: Bipolar disorder is a chronic and recurrent mood disease that includes symptoms that fluctuate from euphoria to depression. As a mood disorder, it is one of the main contraindications for transplantation procedures. The case is presented of a patient with bipolar disorder who had a heart transplant after a cardiac arrest. Heart transplantation is the treatment of choice in patients with heart failure and arrhythmias that do not respond to conventional treatment.

Methods: Case report and narrative review of literature.

Case report: A 34-year-old woman with bipolar disorder diagnosed when she was 13, treated with lithium and aripiprazole. She required a heart transplant as the only therapeutic option, after presenting with ventricular tachycardia refractory to conventional treatment. The patient did not suffer an emotional decompensation with the removal of the lithium and aripiprazole that were associated with prolonged QTc interval, and remained eurhythmic throughout the process.

Discussion: Heart transplantation can be performed safely and successfully in patients with bipolar disorder, when suitably followed-up by a liaison psychiatry group.

Conclusions: Bipolar disorder should not be considered as an absolute contraindication for heart transplantation.

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Trasplante cardiaco en paciente bipolar: reporte de caso

RESUMEN

Palabras clave: Trastorno bipolar Taquicardia ventricular Trasplante de corazón Psiquiatría Introducción: El trastorno bipolar es una afección del estado de ánimo, crónico y recurrente, que cursa con síntomas que fluctúan entre la euforia y la depresión. El trasplante cardiaco es el tratamiento de elección para pacientes con insuficiencia cardiaca y arritmias que no responden al tratamiento convencional, pero este tipo de procedimiento está contraindicado de manera absoluta o relativa para pacientes con trastorno bipolar. Métodos: Reporte de caso y revisión narrativa de la literatura.

Caso: Mujer de 34 años con trastorno bipolar desde los 13, en tratamiento con litio y aripiprazol, que requirió un trasplante cardiaco como opción terapéutica por taquicardia ventricular refractaria al tratamiento convencional. La paciente no sufrió descompensación afectiva al retirársele el litio y el aripiprazol, que se debió suspender porque se asociaron con prolongación del intervalo QTc, y permaneció eutímica a lo largo del proceso con ácido valproico y clonazepam.

Conclusiones: Este reporte de caso muestra un trasplante cardiaco exitoso en una paciente con trastorno afectivo bipolar en eutimia y sin otras contraindicaciones psicosociales para el injerto. Además, destaca la importancia del seguimiento por psiquiatría de enlace durante el proceso.

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Introduction

Bipolar disorder is a chronic, recurrent mood disorder that includes symptoms that swing from euphoria to depression. It affects both males and females with onset between the ages of 20 and 30.1 It affects 2–3% of the world population, making it more common than other medical diseases such as type 1 diabetes mellitus, rheumatoid arthritis and human immunodeficiency virus infection. Recent studies have shown that bipolar disorder is the sixth leading cause of disability in the world and it is associated with high morbidity and mortality rates. There are two types of bipolar disorder: type I, characterised by episodes of mania and depression; and type II, characterised by episodes of hypomania and depression²; type I has a prevalence of 1.3% in Colombia and type II, 0.2%.³

Ventricular tachycardia is common in patients with structural heart disease and is associated with sudden death. In general, treatment is curative using antiarrhythmic drugs, ablation therapy or implant of cardioverter defibrillators. In some refractory cases, heart transplantation may be necessary.⁴

Cardiac transplantation is the treatment of choice for patients with heart failure and arrhythmias who do not respond to the available conventional pharmacological and non-pharmacological treatment.⁵ In Colombia, after kidney and liver transplantation it is the third most common solid organ transplant performed. From January to November 2015, 1096 transplants were performed in Colombia, 157 of which were heart transplants.⁶ Traditionally, severe psychiatric illness, such as bipolar affective disorder, has been considered a contraindication for the transplant of solid organs.⁷ However, bipolar disorder has been linked with metabolic syndrome and multiple studies have found the prevalence of metabolic syndrome to be higher in people with bipolar disorder than

in the general population (17% compared to 8% in Italy; 27% compared to 19% in Belgium; and 32% compared to 36–49% in the United States). Moreover, people with bipolar disorder are known to have a high cardiovascular mortality rate, possibly as a consequence of the associated risk factors, which include hypertension, obesity, dyslipidaemia and diabetes mellitus.⁸

Although the number of patients on the waiting list increases year after year, the number of patients transplanted remains stable at four to five thousand a year. This is because the number of donors does not increase proportionally, and means that candidate patients have to be carefully selected to ensure they meet the necessary requirements.⁹

The aim of this article is to report the case of a woman with bipolar disorder who required a heart transplant because of ventricular tachycardia refractory to conventional treatment. We describe the assessment and accompaniment process by psychiatry pre-transplant and in the immediate postoperative period.

Methods

Case report and narrative literature review. Informed consent was obtained from the patient after she had been given a clear explanation about the academic use of her clinical information and the confidentiality of the data was guaranteed.

The guidelines established in the Belmont report¹⁰ and the declaration of Helsinki¹¹ were followed. The information search was carried out in MEDLINE and Google Scholar. We selected meta-analyses, systematic reviews and case reports. Articles in English and Spanish, with no time limits, were included. The search criteria were: [ventricular, tachycardia], [heart transplantation] and [bipolar disorder]. In Spanish, the terms used were [trasplante cardíaco], [trastorno bipolar].

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