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ACCEPTED MANUSCRIPT

Delusional Infestation Following Misuse of Prescription Stimulants

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Abstract

Delusional parasitosis is an uncommon disorder that has been described as a primary disorder and also in association with a variety of psychiatric disorders. There are only a few descriptions of delusional parasitosis in association with misuse of mixed amphetamine salts (Adderall). Increasing misuse of prescription stimulants place greater numbers at risk for consequent psychiatric morbidities including, rarely, delusional parasitosis. A description of a case of a somatic delusion following chronic use of mixed amphetamine salts is detailed alerting clinicians to the probability of causation and rapid resolution following elimination of the misused stimulant.

Keywords: Dermatology - PSY0280, Primary Care - PSY0530, Somatization - PSY0680, Alcohol/Drug Abuse - PSY0030, Consultation Liaison Psychiatry - PSY0230

INTRODUCTION

Delusional Parasitosis (Ekbom's syndrome) is a fixed, false belief that one is infested with parasites. Imaginary infestation is reported as a perception of pruritis, a tactile hallucination, experienced as insects crawling on the skin, also known as formication. Affected individuals, preoccupied with the perceived infestation, interpret any skin marking as evidence. Sufferers often gather "evidence" compulsively and display it to medical providers, as proof of their infestation, the "baggie sign" (1). Delusional parasitosis is uncommon, the true prevalence being uncertain. While present in all demographic groups, it is most common in Caucasian women in late middle-age or older (2). It can be categorized as a primary (delusional disorder, somatic type), secondary functional (in context of schizophrenia, psychotic depression) or secondary organic (occurring in the context of a medical condition or substance use) (3). Repeated use of psychostimulants has been associated with this disorder in both children and adults (2,3).

Case reports detailing such presentations have implicated mixed amphetamine salts, methamphetamine, ephedrine, cathinones, and other substituted amphetamine-type-drugs. Affected individuals often resist psychiatric referral and present most frequently to

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