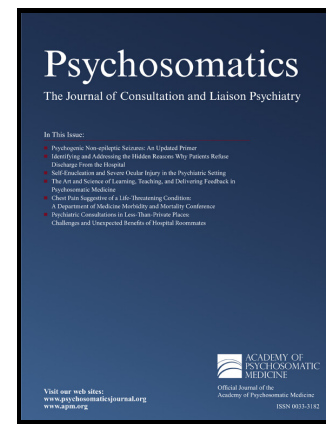


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Psychosis in a 22-Year-Old Woman with Narcolepsy after Restarting Sodium OxybatePatrick J. Buckley^{a*}, Chelsea T. Wolf, M.D.^b

Case Report

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Abstract

Sodium oxybate, the sodium salt of γ -hydroxybutyrate (GHB), is a safe and effective treatment for excessive daytime sleepiness and cataplexy in patients with narcolepsy. Other case reports have described acute psychosis in narcoleptic patients shortly after starting or increasing the dose of sodium oxybate. Here we report the case of a 22-year-old woman with narcolepsy who developed acute psychosis after restarting sodium oxybate at a previously well-tolerated dose. This case highlights the importance of titrating sodium oxybate to therapeutic doses, even after short-term discontinuation, in order to avoid psychiatric side effects.

Keywords

Sodium oxybate, Xyrem, gamma-hydroxybutyrate, narcolepsy, psychosis

Introduction

Narcolepsy is a chronic, often debilitating sleep disorder characterized by intense and excessive daytime sleepiness, hypnopompic and hypnagogic hallucinations, sleep paralysis, and cataplexy.[1] Sodium oxybate, the sodium salt of γ -hydroxybutyrate (GHB), is an effective treatment for moderate-to-severe excessive daytime sleepiness and cataplexy associated with narcolepsy.[2,3] The precise mechanism of sodium oxybate is unknown, but likely involves GABA_B activation in addition to other pathways causing central nervous system depression.[4] Although serious psychiatric side effects were rarely reported during clinical trials of sodium oxybate,[5] several case reports[6-8] and a recent retrospective study[9] suggest sodium oxybate can precipitate acute psychosis at therapeutic doses in narcoleptic patients. Nearly all published cases describe acute psychosis shortly after initiating or increasing the dose of

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