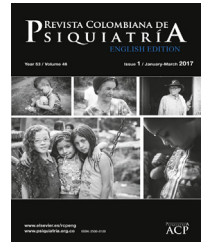




REVISTA COLOMBIANA DE PSIQUIATRÍA

www.elsevier.es/rcp



Case Report

Isotretinoin therapy for acne vulgaris and first episode psychosis in an adolescent patient[☆]



Felipe Valderrama^{a,*}, Andrea Gómez^b, Diana Restrepo^a

^a Departamento de Psiquiatría, Universidad CES, Medellín, Colombia

^b Estudiante de Internado de Medicina, Universidad CES, Medellín, Colombia

ARTICLE INFO

Article history:

Received 13 February 2016

Accepted 29 June 2016

Available online 3 April 2017

Keywords:

Psychotic disorders
isotretinoin
acne vulgaris
drug-related side effects and
adverse reactions

ABSTRACT

Introduction: Isotretinoin is a member of the retinoid family of drugs, and has been used for the treatment of severe acne. Its use has been associated with various psychiatric and behavioural symptoms.

Methodology: A case report and a non-systematic review of the literature are presented.

Results: The case concerns a 13 year-old adolescent with insomnia, delusions, and auditory hallucinations, after two months of treatment with isotretinoin. The patient was admitted to hospital, where the use of psychoactive drugs and systemic disease that could explain the psychotic symptoms are ruled out. After two weeks of stopping the isotretinoin and starting with treatment with olanzapine 10mg per day, there was complete remission of the psychotic symptoms.

Discussion: On the onset of psychotic symptoms in an adolescent with no prior personal or family history of mental illness, the diagnosis of a secondary psychosis needs to be considered.

Conclusion: Clinicians would benefit from knowing the psychiatric symptoms that could be associated with the use of this drug, as well as its suspension and specific treatment for emerging psychotic illness.

© 2016 Asociación Colombiana de Psiquiatría. Published by Elsevier España, S.L.U. All rights reserved.

Primer episodio psicótico en adolescente con acné vulgar y tratamiento con isotretinoína

RESUMEN

Introducción: La Isotretinoina, un medicamento de la familia de los retinoides ha sido utilizada para el tratamiento del acné severo. Su uso ha sido asociado con diversos síntomas psiquiátricos de tipo afectivo, psicótico y comportamental.

Palabras clave:

Psicosis
isotretinoína

[☆] Please cite this article as: Valderrama F, Gómez A, Restrepo D. Primer episodio psicótico en adolescente con acné vulgar y tratamiento con isotretinoína. Rev Colomb Psiquiat. 2017;46:50-54.

* Corresponding author.

E-mail address: fvalderrama1979@gmail.com (F. Valderrama).
<http://dx.doi.org/10.1016/j.rcpeng.2017.03.002>

2530-3120/© 2016 Asociación Colombiana de Psiquiatría. Published by Elsevier España, S.L.U. All rights reserved.

acné vulgar
efectos colaterales y reacciones
adversas relacionados con
medicamentos

Metodología: Reporte de caso y revisión no sistemática de la literatura relevante.

Resultados: Hombre adolescente de 13 años con insomnio, ideas delirantes, alucinaciones auditivas, luego de dos meses de tratamiento con isotretinoína. El paciente es hospitalizado, se descartó el consumo de drogas psicoactivas y enfermedad sistémica que explicaran los síntomas psicóticos. Luego de dos semanas de suspender la isotretinoína y recibir tratamiento con olanzapina 10 mg al día remitieron los síntomas psicóticos.

Discusión: El inicio de síntomas psicóticos en un adolescente sin antecedentes personales ni familiares de enfermedad mental exige considerar el diagnóstico de psicosis secundaria. Los clínicos se benefician de conocer los síntomas psiquiátricos que se pueden asociar con este medicamento, considerar la suspensión y el tratamiento específico para la psicopatología emergente.

© 2016 Asociación Colombiana de Psiquiatría. Publicado por Elsevier España, S.L.U.

Todos los derechos reservados.

Introduction

Acne vulgaris is a common skin disease that affects 85% of adolescents. The most commonly reported psychological symptoms suffered by patients with acne are related to anxiety, depression and suicidal ideation.¹

Among the therapeutic options for severe acne is isotretinoin, a 13-cis-trans isomer of retinoic acid.² Retinoids are a family of compounds that include vitamin A, its derivatives and chemically related synthetic molecules. The therapeutic effect of isotretinoin is mediated by three mechanisms: (a) reduction in the function of the sebaceous glands; (b) inhibition of the formation of new comedones, and (c) inhibition of growth of *Propionibacterium acnes*.³

Although isotretinoin is indicated only for the treatment of severe cases of acne, it is often used in mild and moderate cases.⁴ Isotretinoin was first introduced on the market in 1982, and the following year Hazen et al.⁵ published a series of 24 cases of depression related to the use of the drug. Initially reports of cases with psychiatric symptoms appeared to be “anecdotal” or an idiosyncratic reaction to the drug, until in 1998 the Food and Drug Administration (FDA) demanded that the laboratory that developed the original isotretinoin molecule insert a warning on the pack containing the product: “Isotretinoin psychiatric disorders. Can cause depression, psychosis and rarely suicidal ideation, suicide attempts and suicide. Discontinuation of this drug as therapy may be insufficient, and further evaluation may be necessary”.

Subsequently there were some cases of suicide which were widely publicised in the United States and prompted a debate in the US Congress. As a result of this, the following warning was added to the product warning label: “Its use may be associated with aggressive and/or violent behaviour”. Later, in 2002, the American Academy of Dermatology convened a panel of experts who concluded that epidemiological studies at that time did not show an association between isotretinoin and depression and suicide, because acne per se may be a risk factor for depression. The panel also pointed out that there was insufficient scientific evidence on the effects of retinoids on adult brain function. From 1982 to 2002, the FDA's Adverse Event Reporting System (AERS) received 3104

reports of psychiatric adverse events attributed to the use of isotretinoin, including 173 suicides.⁶

The aim of this article is to present the case of an adolescent male who presented with a first psychotic episode associated with the use of isotretinoin for acne. Although the scientific evidence from the past 20 years on the adverse psychiatric effects of isotretinoin in the affective sphere are well documented, mainly depression and suicidal ideation, to date there have been very few cases of psychosis related to this drug.

Description of the case

A 13-year-old adolescent male living in an urban area of Medellín whose parents took him to the Accident and Emergency with a 5-day history of delusional paranoid ideas (“Everyone's trying to hurt me”), hallucinations (“Someone's talking to me from behind the curtains”), suspicious attitude, irritable affect, motor restlessness, difficulty falling and staying asleep, poor appetite and family and social withdrawal. During that period there had been no passive experiences, false acknowledgements, alterations of the form or the course of his thought or affective depressive or manic symptoms. At the time of the consultation the patient lived with both parents, was in the normal year of schooling for his age, with good academic performance and no disciplinary problems and regularly played tennis. His parents described him as sociable, extroverted, calm and responsible. He had no previous psychiatric history.

As significant previous medical history, he had slight head injury at the age of 11; a simple brain CT was normal, with no transient or permanent neurological deficit, and he did not require hospitalisation, surgery or subsequent medical follow-up. The family reported that there was no consumption of toxic substances, and rapid tests in urine were negative in the A&E. For the previous 2 months he had been taking isotretinoin 20 mg/day prescribed by dermatology for the treatment of nodular acne on his face and back. There was no family history of mental illness.

On admission to hospital, laboratory tests were requested (Table 1). Treatment was started with oral haloperidol 2 mg/night. Isotretinoin was discontinued and the patient was referred for admission to psychiatric hospital.

Download English Version:

<https://daneshyari.com/en/article/8926974>

Download Persian Version:

<https://daneshyari.com/article/8926974>

[Daneshyari.com](https://daneshyari.com)