Case report of a patient with refractory delusional disorder, somatic type, treated with electroconvulsive therapy successfully with good clinical response

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Objectives

Electroconvulsive Therapy (ECT) is rarely used in delusional disorder (DD). We present a case to illustrate the use of ECT as treatment for refractory DD.

Background

Standard treatment for DD is pharmacological, but evidence is limited. There are reports of ECT used in DD, although benefits may result from resolution of underlying depression.

Materials and Methods

Case report. 27 year old male patient referred from a psychiatric ambulatory practice due to persistent fatigue and abdominal pain associated to a delusional idea that he had a candidiasis infection. Physical exam and laboratory showed no findings suggesting infection. Normal brain CT and abdominal ultrasonography.

Results

Because of persistent delusional idea, the patient was diagnosed with DD, somatic type. Treatment included sertraline 100 mg qd, olanzapine 30 mg qd and risperidone 6 mg qd. Due to lack of response within a month, ECT was indicated. Initial acute phase consisted of 9 treatments of right unilateral (RUL) brief pulse width (0.3 ms) ECT tri-weekly. Charge was 115 mC (6 x seizure threshold). Sessions three through four were conducted at 153 mC. He completed 9 ECT sessions. Seizure duration averaged 35 seconds. Primary outcome measure was the PANSS scale and secondary measure was MoCA scale (Table 1).

<table>
<thead>
<tr>
<th></th>
<th>Pre ECT</th>
<th>Post ECT</th>
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<tbody>
<tr>
<td>PANSS (+)</td>
<td>19</td>
<td>13</td>
</tr>
<tr>
<td>PANSS (-)</td>
<td>30</td>
<td>30</td>
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<tr>
<td>PANSS-G</td>
<td>43</td>
<td>35</td>
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<tr>
<td>MoCA</td>
<td>27</td>
<td>24</td>
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Table 1: Results pre ECT and post ECT

Conclusions

ECT could be an effective treatment in DD refractory to antipsychotics.

References