Article: 1669
Topic: EPV31 - e-Poster 31: Schizophrenia

Very Late-onset Schizophrenia: a Case Report

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Introduction: Late-onset psychoses (LOP) are a heterogeneous group of disorders whose nosology has been controversial throughout history. LOP presents in patients over 45 years of age and Very Late Onset Psychosis (VLOP) over 65. The incidence of VLOP is 0.2% in the general population and 15% among schizophrenics. The ICD-10 and DSM-IV do not have a category for LOP or VLOP and, despite contrary expectations, DSM-V maintains the void.

Aims and methods: To emphasize the specific symptoms of VLOP though the study of a case report.

Results: A 73-year-old woman developed psychotic symptoms during the last six years, consisting of auditory and verbal hallucinations and paranoid delusions, without cognitive or functional impairment. The patient and her family denied family history of mental illness.

She was admitted in our inpatient unit. Neuroimaging, laboratory tests, cognitive assessment were done in the inpatient unit without significant alterations. She was treated with Risperidone, Mirtazapine, Ciamemazine, Escitalopram, and Zuclopentixol with improvement of the psychotic symptoms and without important side effects. At the time of hospital discharge, psychotic symptoms had almost disappeared and no behavioral or emotional disorder was observed.

Conclusions: LOP and VLOP e seems much more common than previously thought. One of the main problems is that current classifications do not include specific diagnostic categories for these entities, despite the fact that they have distinctive nosologic features, etiology, treatment and prognosis compared with Early Onset psychosis (EOP). We believe that given an aging population, LOP and VLOP should be considered more often by clinicians.