
PSYCHIATRIC MANIFESTATIONS AND TREATMENT RESPONSE IN TUBEROUS SCLEROSIS COMPLEX: CASE REPORT

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Objective: The study of various psychiatric manifestations of tuberous sclerosis complex (TSC) and psychopharmacologic medications used to treat these disorders through a case of a patient followed for TSC and bipolar disorder, and with a review data from the literature.

Methods: In this case report, we present the association of Tuberous sclerosis and bipolar affective disorder in a young man. The literature data were collected by searching PubMed.

Results: We found in the literature various psychiatric manifestations in patients with TSC like behavioral disorders, learning disability, mental retardation, attention-deficit/hyperactivity disorder, autism spectrum disorders, mood disorders, anxiety disorders and thought disorders.

The psychoactive medications most often prescribed for these disorders were antipsychotics essentially second generation (Risperidone, Quetiapine, Aripiprazole, Olanzapine), antidepressants, and anticonvulsants with mood-stabilizing properties (Clonazepam, Valproic acid). In this case report, our patient had TSC, referred to epilepsy, skin lesions (Angiofibromas, Shagreen patches) and confirmed by the neuroimaging (multiple calcified subependymal nodules, a thickened gyrus (cortical tuber), an astrocytoma in the right frontal region), with bipolar disorder type I manifested by manic episodes with psychotic features. The patient responded well to treatment with Quetiapine, Valproic acid and Clonazepam after resistance to Risperidone and Haloperidol.

Conclusion: Considering the rarity of bipolar disorder in TSC, the clinical management of these patients should be done on an individual basis. However, the use of anticonvulsant mood stabilizers seems obvious because of the very high incidence of epilepsy in TSC. Quetiapine was one of the most effective antipsychotics in TSC and which showed a positive benefit for our patient at follow-up.