

28th World Congress on

PSYCHIATRY, PSYCHOLOGICAL SYNDROMES & THERAPEUTICS

May 21-22, 2018 | New York, USA

Unique somatic delusions in a schizoaffective patient

Sartaj S Brar

Kaweah Delta Health Care District, USA

Background & Motivation: This is a case of a male pretrial inmate in his 30's admitted into a psychiatric hospital due to self-harm and poor self-care. He had sustained severe injuries in an attempt to remove large portions of his scalp. In fixed somatic delusions such as these, patients tend to fail to respond to a range of antidepressant and antipsychotic medications. This case report presents an instance in which a schizoaffective patient with a fixed somatic delusion was unresponsive to conventional treatment. Also discussed are warning signs for malingering and barriers to treatment in this particular patient population.

Methods: I had interviewed this patient throughout his hospital stay and reviewed the patient's records, including prior admissions, to attain enough information to put together a plausible set of explanations and differential diagnoses.

Results: The patient believed that someone had put super glue under the skin of his scalp while he was sleeping in his jail cell, and that the only way to remove it was by picking at it until it was gone. His explanations as to who had altered his scalp seemed to vary significantly; at different points, he stated that it had been done by movie stars from Hollywood, fellow inmates in jail, and a distant relative of a friend. Throughout his hospitalization, he had severe excoriation of his scalp, with bright red flesh being clearly visible to the naked eye.

Discussion: Review of the literature suggests numerous reasons for why people may present with somatic delusions. One hypothesis is that it serves as a defense mechanism to cope with trauma and other stressors. In the case of this patient, prior to his admission he had numerous financial and environmental stressors, such as being unemployed and divorced, as well as a history of physical and emotional trauma.

Conclusions: Somatic delusions are still poorly understood, and a wider range of research is still needed to explain the pathophysiology behind delusional symptoms and their association to other psychiatric disorders. Extensive research is also needed to understand how to better treat fixed somatic delusions, as the current treatment protocol seems to be ineffective in patients such as this one.

Biography

Sartaj S Brar has completed his premedical program at Kasturba Medical College International Center in Manipal, India. After this program, he finished his two years of Basic Science courses at American University of Antigua. Currently, he is a third year Medical student doing clinical rotations at various hospitals around the USA. He has been lucky enough to have been able to see many interesting patient cases while doing these rotations. Throughout his personal life, he has seen others struggle with their physical and mental ailments. Along with working with patients during his rotations further fosters his unrelenting desire to serve the populace and continue his plans to practice as a doctor. He is looking forward to learning and providing the best professional medical care as a medical student, and eventually as a licensed Physician.

sartajsi@auamed.net

Notes: