

## **PS1.081**

### **Dysphagia plus candidiasis (almost) ruined a marriage**

*Andreia Fernandes, M Oliveira*

*UCSP Anadia III, Anadia, Portugal*

*Corresponding author: Dr Andreia Fernandes, Health Care Center, Health Care Center, Anadia, Portugal. E-mail: andreiapontofernandes@gmail.com*

**Introduction:** This is the case of a patient presenting dysphagia apparently due to an esophageal candidiasis. The challenges were finding the cause and understand the reason to the complaints after treatment. The diagnosis brought a third problem to the patient, mistrust of partner. This case is challenging both in diagnosing as to the interference with family dynamics, being the Family Doctor to manage all these aspects.

**Case Description:** The patient is a 70 year-old Caucasian male who presented to a primary care facility complaining of a one month history of dysphagia for solids and liquids and sometimes post-nasal regurgitation. A careful physical examination only revealed a systolic murmur grade II. He had an oesophagogastroduodenoscopy that revealed an extensive esophageal candidiasis which in some areas almost occluded the lumen. The patient was treated with oral fluconazole and at reevaluation endoscopy everything was normal. Despite the improved imaging, the patient remained complaints and it was necessary investigate causes for the disease, including AIDS. At this point, came among the couple a relational conflict because his wife got the disease as transmitted through sexual intercourse. A medical intervention with the wife was necessary in order to demystify and clarify her doubts. Three months after first consultation the complaints persisted, referring as new difficulty in articulating words. It was requested head CT scan and neurology consultation. The patient had already undergone chest X-ray, spirometry and thyroid ultrasound all unchanged. Serological tests were all negative, thyroid function was also good. In otorhinolaryngology consultation held nasopharyngoscopy that revealed no abnormalities. At this time remains undiagnosed, awaiting neurology consultation.

**Discussion:** This patient's case demonstrates how sometimes medicine isn't obvious and creates unexpected difficulties. The communication between Family Doctor and the patient demonstrates how simple is to create communication channels between family members which promotes problem solving.