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“Dr, I prefer to have pimples!” - a clinical case on the effects of isotretinoin

Ana Margarida Ferreira(1), AM Correia(2), M Rocha(3), T Tavares(1), E Monteiro(4)

(1) USF Viseu-Cidade, Viseu, Portugal

(2) USF Grão Vasco, Viseu, Portugal

(3) USF Infante D. Henrique, Portugal

(4) Centro Hospitalar Tondela-Viseu, Departamento de Saúde Mental, Viseu, Portugal

Corresponding author: Dr Ana Margarida Ferreira, USF Viseu-Cidade, USF Viseu-Cidade, Viseu, Portugal. E-mail: amargaridaccferreira@gmail.com

Background: Isotretinoin is an oral synthetic retinoid used to treat moderate to severe acne, when there is no response to other treatments. However, it has several side effects. Since the 80s, isotretinoin has been linked with depression, suicide and psychosis, but this is still controversial.

Aim and Methods: To describe a case of a psychotic episode in an adolescent taking isotretinoin for acne, using as main variables: symptoms, treatment and evolution.

Results: A 17-years old adolescent, suffering from acne, was evaluated in Dermatology appointments at Hospital Center Tondela-Viseu (CHTV) and oral isotretinoin was prescribed in September 2014. He went to Pediatrics Emergency Room (ER) of CHTV in 27/10/14 due to social isolation, unstable mood, anorexia, insomnia and locomotion impairment. The assistant dermatologist was called and recommended isotretinoin suspension and evaluation by child and adolescent Psychiatry (CP). In the absence of CP in the ER a Psychiatry evaluation was requested. The patient was sad, had a perplex look, scared and suspicious. He referred persecutory delusions, blockage of thought and a decrease in sleeping hours. He denied drugs consumption and smoking. Paliperidone and ethyl lofazepate were prescribed and a first psychotic episode appointment (FPEA) was scheduled. In the FPEA the patient said he was feeling better, less confuse and anxious, but very sleepy. The ethyl lofazepate dosage was reduced. In the following FPEA he said he was more focused, “without that ideas” and paliperidone dosage was also reduced. He kept follow-up in FPEA.

Conclusions: Once isotretinoin can cause depression and psychotic symptoms, it is crucial to closely monitor its possible side effects. The family doctor has a key role in this task, by giving support to patients and their families and clarifying the benefits and risks of isotretinoin.

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