

Poster Abstracts

PO-67

ACUTE MENTAL STATUS CHANGE AND FEVER IN LITHIUM TOXICITY: A CASE REPORT

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Objectives:

- To highlight a case of lithium toxicity which presented as acute mental status change and fever
- To propose an algorithm for managing cases of Altered Mental Status (AMS) which can be utilized in the Emergency Department (ED)

Methods:

- Case report

Results: Lithium toxicity is classified into three major categories; namely, acute, acute-on-chronic, and chronic. Chronic intoxication is associated with the most serious toxicity. Therapeutic lithium is an essential part of the pharmacologic arsenal of clinical psychiatry. The care of lithium-poisoned patients should be predicated on rapid clinical evaluation of the patient's condition. This report presents a case of a 45-year old female patient with Bipolar I disorder, maintained on Lithium carbonate and Risperidone, who developed acute mental status change with fever. To improve clinical outcome, emphasis was made on the importance of awareness of the symptoms, early diagnosis of complications and timely therapeutic measures. Hemodialysis is indicated in patients who are manifesting severe signs and symptoms of neurotoxicity, such as alterations in mental status. It was then recommended that continuous training of professionals in mental health awareness is a must to improve the mental health system in the Philippines.

Conclusion: Lithium toxicity is a medical emergency, potentially causing permanent neuronal damage and death. In psychiatric patients who present at the ED with acute alteration in mental status, are maintained chronically on lithium carbonate, a high index of suspicion about ongoing lithium toxicity is warranted. Awareness of the symptoms of toxicity, early diagnosis of complications, and timely therapeutic measures on the part of the physician can ultimately lead to improved clinical outcomes.