

## Postictal Psychosis: when epilepsy triggers psychosis...

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Patients with epilepsy have a higher risk of psychiatric disorders compared to general population: depression, anxiety in roughly one third of patients, suicide from 5% to 14%, and psychosis (Hingray et al. 2017).

A meta-analysis reported that the prevalence of psychoses was high (5.6%) in epilepsy – the highest prevalence reached 7% in temporal lobe epilepsy. Postictal psychosis (PIP) is a rare and severe psychiatric complication of drug-resistant epilepsy, occurring in roughly 2 % of patients with epilepsy (Clancy et al. 2014). Since the 19th century, psychiatrists reported the specificity of PIP presentation (Falret 1861, Henri Ey 1946) but literature is scarce and old. In addition, psychiatrists and neurologists have an imprecise knowledge about psychosis of epilepsy (Tarrada et al. 2019, Epilepsy & Behavior). Notably, we reported that 40% of clinicians did not know the difference between postictal confusion and postictal psychosis.

The aim of this topic is to describe clinical signs of Postictal Psychosis and its specificities ,its evolution, complications (ie violent behaviors...) and treatment. I also propose an algorithm for the diagnosis of epileptic psychoses. As postictal psychosis is a cause of secondary psychosis (Keshavan et al. 2013, World Psychiatry), it might improve the differential diagnosis of brief psychotic episode and the prescription of EEG by psychiatrists. An implicit objective of this work is also to promote collaborations between psychiatry and neurology and improve transdisciplinary knowledge.

### Biography :

Resident in Psychiatry at Paris University School of Medicine. During my residency, I made two internships in Neurology (6 months in general neurology and 6 months in epileptology). I published 5 papers about psychiatric comorbidities of epilepsy (epileptic psychosis, psychogenic non-epileptic seizures). Currently, I am a young researcher, doing my Master degree in Neurosciences – Electrophysiology at Sorbonne Université (Paris) in collaboration with the CRAN unit research in Nancy (Hôpital central).

Note: This work is partly presented at Webinar on Neuroscience and Psychiatry April 29, Paris, France



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