Persecutory delusions as atypical onset of Frontotemporal Dementia: a case report

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Introduction
Frontotemporal Dementia (FTD) is a progressive neurodegenerative brain disorder characterized by behavior, personality and language impairment in association with prominent frontal and temporal atrophy. Three major clinical variants are recognized: behavioral variant FTD (bvFTD), Semantic Dementia (SD) and Progressive Non Fluent Aphasia (PNFA).

Case Report
We present a case of 67-year-old female with behavioral impairment and persecutory delusions admitted for the first time to psychiatric service. This atypical presentation first led to her incorrect diagnosis of delirious bouffée. She had a past history of irritability, aggressiveness, persecutory traits with a progressive impairment of functional and socially activities. She was submitted to neuropsychological assessment which showed cognitive and metacognitive deficits (attentive functions, working memory, self-awareness, abstractive abilities). A subsequent magnetic resonance imaging (MRI – figure 1a and 1b) showed atrophy of frontal and temporal lobes (left more prominent than right) and a Positron Emission Tomography with fluorine-18 fluoro-D-glucose (F18-FDG-PET - figure 2) showed mild reduction in glucidic metabolism in frontal and temporal lobes bilaterally. Genetic counseling suggested evaluations of three major genes associated with FTD that are Microtubule-Associated Tau Protein (MAPT), Progranulin (GRN), Hexanucleotide Expansions in Chromosome 9 (C9ORF72). They are still in progress.

Conclusions
This case report shows an atypical onset of bvFTD, masked as psychiatric symptoms, which has had the most appropriate treatment only after a correct diagnosis.

References