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Case report

DELUSIONAL PARASITOSIS WITH ALCOHOL DEPENDENCE: A CASE REPORT

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ABSTRACT

Delusional parasitosis is a syndrome with which most psychiatrists are familiar. However, most reports consist of case reports or small series. We present here a case report of delusional parasitosis of an extremely bizarre nature in a case of alcohol dependence that responded to pimozide, haloperidol and electroconvulsive therapy (ECT).

Keywords: Delusional parasitosis, Bizzare, Alcohol dependence, ECT.

INTRODUCTION

Delusional parasitosis (DP) is a delusional disorder characterized by a fixed belief of infestation by parasites, despite a lack of supporting medical evidence.[1-2] DP may involve tactile hallucinations, psychosocial functioning may be variably impaired secondary to the delusion, and the duration of any concurrent mood disorder must be brief in comparison to the total duration of the delusion in order to meet diagnostic criteria.[3] Primary DP is not due to a general medical condition or substance abuse, while secondary DP is related to a variety of medical disorders, including stroke, leprosy, peripheral neuropathy, and loss of visual acuity, as well as substance abuse and other psychiatric disorders.[4-5] In the present case report, we report a delusional parasitosis in relation to alcohol dependence.

CASE REPORT

A 40year old right handed male, Hindu by religion, matriculate and married since 15years having 2 children, working as a rickshaw driver presented to the outpatient department of our hospital brought by his wife with the chief complaints of fearfulness, suspiciousness, inability to sleep at night, alcohol consumption, hearing voices inaudible to others and sensation of worms in the groin region. These symptoms were present since 5 years prior to presentation. The patient was apparently alright 10 years prior to presentation when he started alcohol consumption in the form of country liquor (haathbatti) for fun and pleasure and then gradually increased the frequency and quantity of consumption. He then shifted to daily drinking with a history of an eye opener drink being present. The patient was also unable to go to work and his wife who is a maidservant works to support the family.

The patient had withdrawal symptoms if he did not get alcohol for a few days in the form of insomnia, tremors, loss of appetite and irritability while these symptoms were relieved on taking alcohol. The patient had a history suggestive of tolerance as the patient increased the quantity of consumption of country liquor. He would earlier consume 2-3 quarters a day which gradually increased to 4-5 quarters a day. He had a history of angry, abusive and aggressive behaviour with family members under influence of alcohol. 5 years prior to presentation,

there was a shortage in the supply of haathbatti and the patient did not get alcohol for 2-3 days. He started becoming fearful that someone is following him to do harm to him and he would hide behind the door and under the bed. He started removing all his clothes and walking naked in the house and would even try to run out of the home in that state but family members would stop him. He would hit himself at times, mutter and gesticulate by himself. The fearfulness and psychotic features persisted despite restarting the consumption of alcohol.

He was taken to various hospitals for deaddiction. Each time he would abstain for a few weeks and the maximum abstinence has been for 6-7 months while the psychotic features persisted during this time.

The patient describes four men – maharaja, papa, joseph and masterji who are trying to harm him, he can hear their voices throughout the day but one at a time. He claims they are watching him 24 hours of the day, they tell him what to do and what not to. Patient claims they have a special connection and only he can hear them. He has never seen any of them except papa who he claims lives near his house. The wife denies the presence of any such person. He claims the voices come from outside of the window and he has tried finding them on many occasions but has not found the source. The voices tell him continually what to do and what not to, if he doesn't follow their orders, they release worms in the groin area of his body.

25000 worms suck his blood and semen whenever he disobeys them. 7000 of them just bite him, and he can feel the sensation. The worms even crawl up to his chest and suck his nipples and draw milk. The worms are given a human like quality of speaking and they call him pitaji (father). The worms talk to the patient and say that if they do not follow the instructions given to them of sucking, they will not get food and diet. He can feel them walking, biting and sucking him but as soon as he takes off his pants, they all vanish. He says he has seen only one worm, on one occasion which was 4cm long, brownish in colour and had a hole at one end. The worms also tell him not not communicate all this to the doctor or they will punish him more. He believes the 4 men have performed 14 surgeries on his groin area; they removed and replaced his genitals with the help of worms, although the scars of the surgery are not seen. One of the voices, Joseph tells him that the patient's wife is his wife, this disturbs him a lot, but he is not suspicious towards his wife.

The patient was started on antipsychotics in the form of Haloperidol (15mg/day), Trihexyphenydyl (6mg/day), Olanzapine (15mg/day) and was on an alcohol withdrawal line of management. He was admitted in the psychiatry ward and was given 5ECT's in view of the delusions. Patient was symptomatically better and discharged and asked to follow up on OPD basis for ECTs but he did not do so. His auditory hallucinations had stopped, although the sensations of worms persisted at times during the day. The patient has abstained from alcohol after discharge, but non adherent on treatment. Patient's psychotic symptoms increased again a month post discharge and he restarted alcohol consumption following the occurrence of psychotic symptoms. The patient has been counselled regarding abstaining from alcohol and the medication was changed to Pimozide4mg per day, which was gradually increased to 8mg along with Haloperidol and trihexyphenydyl. The patient is currently being worked up for another course of ECTs.

DISCUSSION

DP has been known to occur in the presence of substance abuse and may also be seen with the presence of tactile hallucinations.[6] Patients with DP may engage in self injurious behaviour and may scrape or peel their skin when they feel the worms crawling. They may collect the worms and bring specimens to show their doctor often called the 'match box sign'.[7] The case we have presented above is a little different from classic cases of DP as the delusion here harbours on to or overlaps a delusion of bizarre quality. He claims that the worms are released by someone in his groin area and that the number is 2500 or 7000. He also claims that the worms talk to him and call him names. The bizarre quality is personified when he says that the worms has operated on and replaced his genitals. He also claims that the worms reach his nipples and suck milk. This is one of the rare cases where we have come across delusional parasitosis of a highly bizzare nature coupled with alcohol dependence.

DP is a disorder where the response to medication is often incomplete and unsatisfactory. No randomized controlled trials or studies are available due to the rarity of the condition.[8]Risperidone, Olanzapine,

Haloperidol and Pimozide have all been used extensively.[9] Electroconvulsive therapy may be a viable option when medicines fail and must be explored. Combining various forms of treatments together are often the best options in these cases.[10] The patient is often distressed by the symptoms and needs quick relief from the problem.

CONCLUSION

DP is a disorder with which every dermatologist, and emergency medicine personnel should become familiar. To date, however, the only effective pharmacological options are antipsychotic medications. A combination of treatments to treat both DP and the existing comorbid psychiatric conditions is often warranted.

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