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Case Report on Organic Brain Syndrome

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Abstract: Organic brain syndrome (OBS) is a general term used to describe decreased mental function due to a medical disease, other than a psychiatric illness. Hypoglycemia is a biochemical abnormality and often the rate-limiting step in the treatment of both type 1 and type 2 diabetes mellitus. Left uncorrected and prolonged, hypoglycemia can result in neuronal dysfunction and death, with deficits ranging from measurable cognitive impairments to aberrant behavior, seizures and coma. In this case report, hypoglycemia resulted in severe and persistent neurological (slurred speech and gait abnormalities), cognitive (inattention, disorientation and memory deficits) and behavioral manifestations (verbal hostility and irritability). It highlights the potentially severe neuropsychiatric sequelae following hypoglycemia and is timely for clinicians to be reminded that hypoglycemia prevention needs to be more of a focus on diabetes care in general.A case of rapid neurological deterioration in a 60-year-old man with hypertension and diabetes was reported. Factors suggesting a poor prognosis are repeated attacks, incomplete recovery, a progressive disease course and a high level of CSF leucocytosis during acute attacks.

Keywords: Organic brain syndrome, hypoglycemia, psychiatric illness, cognitive impairments

INTRODUCTION

Organic brain syndrome (OBS) is a general term used to describe decreased mental function due to a medical disease, other than a psychiatric illness. It is often used synonymously (but incorrectly) with dementia[1].



Chronic organic brain syndrome

Due to the cause, chronic drug or alcohol dependence can cause an organic brain syndrome due to

their long-lasting or permanent toxic effects on brain function[2]. Other common causes of chronic organic brain syndrome sometimes listed are the various types of dementia, which result from permanent brain damage due to stroke, Alzheimer's disease, or other damaging causes which are not reversible. In this condition Symptoms of OBS differfromcase. Symptoms of neurodegenerative disorders typically involve confusion. OBS may make a person unable to hold a job or be independent. Symptoms which may be caused by neurodegenerative diseases include: memory loss (patients may forget family and friends; they may be continually confused as to where they are and what is happening) difficulties in understanding concepts (e.g., at sunset, they may ask why the sun has gone and if it will return) anxiety (people who are confused often become anxious because they do not fully understand what is happening) [3].Sign and tests depends on the disorder for this include blood tests. Electroencephalogram, (EEG), CT scans, MRI. Treatment of OBS varies with the causative disorder or disease. It is important to note that it is not a primary diagnosis and a cause needs to be sought out and treated [4]. Many of the disorders are treated mainly with rehabilitation and supportive care to assist the person in areas where brain function is lost. Medications may be needed to reduce aggressive behaviors that can occur with some of the conditions[5]. Prognosis is short-term and treatable, but many are long-term or get worse over

time. Complications are People with OBS often lose the ability to interact with others or function on their own.

CASE REPORT AND DISCUSSION

A case of rapid neurological deterioration in a 60-year-old man with hypertension and diabetes was reported. It is a prospective observational study carried out in the Rajiv Gandhi institute of medical sciences, kadapa, Andhra Pradesh. Factors suggesting a poor prognosis are repeated attacks, incomplete recovery, a progressive disease course and a high level of CSF leucocytosis during acute attacks. In this case report, hypoglycemia resulted in severe and persistent neurological (slurred speech and gait abnormalities), cognitive (inattention, disorientation and memory deficits) and behavioral manifestations (verbal hostility and irritability).Organic brain syndrome (OBS) is a general term used to describe decreased mental function due to a medical disease, other than a psychiatric illness. Hypoglycemia is a biochemical abnormality and often the rate-limiting step in the treatment of both type 1 and type 2 diabetes mellitus. Left uncorrected and prolonged, hypoglycemia can result in neuronal dysfunction and death, with deficits ranging from measurable cognitive impairments to aberrant behavior, seizures and coma.

CONCLUSION

In this case report, hypoglycemia resulted in severe and persistent neurological (slurred speech and gait abnormalities), cognitive (inattention, disorientation and memory deficits) and behavioral manifestations (verbal hostility and irritability). It highlights the potentially severe neuropsychiatric sequelae following hypoglycemia and is timely for clinicians to be reminded that hypoglycemia prevention needs to be more of a focus on diabetes care in general.

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