

APPA 2021 Spring Meeting Medical Student/Resident Poster Presentation

Abstract 21-1-07

Title: A Case Report on Conversion Disorder: An Unusual Presentation of an Unusual Disorder

Authors: Chris Roberts, MS3; Alexandru Ghilezan, DO; Lori Lowthert, MD

Summary: Conversion disorder, or functional neurological symptom disorder, is usually characterized by a broad range of neurological symptoms, which most commonly include blindness, paralysis, or impaired sensation, without an identifiable neurological or medical cause. The pathogenesis of conversion disorder is still largely unknown today^{1,2}. However, patients with conversion disorder may have increased rates of a history of trauma, abuse, or comorbid psychiatric diseases^{1,2,7}. Since conversion disorder can present with a wide variety of symptoms, its diagnosis and treatment is often difficult and presents an interesting challenge for clinicians³⁻⁶.

Here we present the case of a 27-year-old female patient, with a past medical history of schizophrenia and borderline personality disorder, who was admitted to an inpatient psychiatric hospital. During the hospital course, the patient began displaying periodic, involuntary abnormal movements and vocalizations which were precipitated by acute stress. Episodes included uncontrollable arm movements, such as flailing her arms or hitting herself in the face, as well as involuntary screaming and yelling. Although patient had been diagnosed with other psychiatric disorders, over time she became more focused and concerned about diagnosing these episodic incidents that she believed to be a tic disorder which would prevent her from being discharged.

Conversion disorder is a relatively rare diagnosis thus making it a challenging condition for clinicians. Additionally, this patient is noteworthy as she had an atypical presentation due to her uncommon symptoms which presented secondary to psychological stressors. Given the patient's anxiety about her episodes was improved once she was informed of her diagnosis this case illustrates the importance of a proper diagnosis and tactful conversation with patient about it.

References:

1. Nicholson TRJ, Stone J, Kanaan RAA. Conversion disorder: A problematic diagnosis. *J Neurol Neurosurg Psychiatry*. 2011;82(11):1267-1273. doi:10.1136/jnnp.2008.171306
2. Sharpe D, Faye C. Non-epileptic seizures and child sexual abuse: A critical review of the literature. *Clin Psychol Rev*. 2006;26(8):1020-1040. doi:10.1016/j.cpr.2005.11.011
3. McWhirter L, Ludwig L, Carson A, McIntosh RD, Stone J. Transcranial magnetic stimulation as a treatment for functional (psychogenic) upper limb weakness. *J Psychosom Res*. 2016;89:102-106. doi:10.1016/j.jpsychores.2016.08.010
4. Ricciardi L, Edwards MJ. Treatment of Functional (Psychogenic) Movement Disorders. *Neurotherapeutics*. 2014;11(1):201-207. doi:10.1007/s13311-013-0246-x
5. Sharma VD, Jones R, Factor SA. Psychodynamic Psychotherapy for Functional (Psychogenic) Movement Disorders. *J Mov Disord*. 2017;10(1):40-44. doi:10.14802/jmd.16038

6. Stonnington CM, Barry JJ, Fisher RS. Clinical Case Conference Conversion Disorder. *Am J Psychiatry*. 2006;163(9):1510-1517.
7. O'Brien FM, Fortune GM, Dicker P, et al. Psychiatric and neuropsychological profiles of people with psychogenic nonepileptic seizures. *Epilepsy Behav*. 2015;43(1):39-45.
doi:10.1016/j.yebeh.2014.11.012