

Poster presentation

Successful treatment with amisulpride of a woman with tourette's disorder: a case report

KN Fountoulakis*, A Iacovides and GS Kaprinis

Address: 3rd Department of Psychiatry, Aristotle University of Thessaloniki, Greece

* Corresponding author

from International Society on Brain and Behaviour: 1st International Congress on Brain and Behaviour
Hyatt Regency Hotel, Thessaloniki, Greece, 20–23 November, 2003

Published: 23 December 2003

Received: 1 November 2003

Annals of General Hospital Psychiatry 2003, **2**(Suppl 1):S79

This article is available from: <http://www.general-hospital-psychiatry.com/content/2/S1/S79>

Background

Tourett's disorder is generally treated with antipsychotic medication. Pure antidopaminergic activity is considered the way antipsychotics act in these patients. Amisulpride is the purest antidopaminergic atypical antipsychotic, and thus could serve as an ideal choice for the treatment of Tourett's disorder

simultaneously started visiting a gynecologist for the treatment of amenorhea.

Discussion

To our knowledge this is the first report concerning the use of amisulpride in Tourette's disorder.

Material and Methods

We report the case of a 40 years old married female suffering from Tourette's disorder.

Results

At the age of 5, the patient manifested involuntary head movements, at the age of 8 involuntary leg movements and by the age of 12–13 years vocal tics appeared. During the previous 10 years the patient received mirtazapine, buspirone, valproic and sulpride. Only sulpride had a weak effect. The patient was assessed with the Yale Global Tics Severity Scale. Her baseline motor score was 16, her phonic score 18 and her impairment score 30. She was put on amisulpride 100 mg per day. Three weeks later her scores dropped to 9, 10 and 20 respectively. Amisulpride was raised to 200 mg daily and after another three weeks her scores were 5, 6 and 10 respectively. A further titration to 400 mg/day was made but without further improvement. The patient decreased the dose to 100 mg/day without any deterioration in her condition. For the next three months the patient continued receiving treatment and her condition was stable. Then she decided to discontinue because of amenorhea and within 20 days the symptoms reappeared. Her scores climbed to 10, 11 and 30. The patient decided to restart amisulpride treatment and