Clinical Reminders

Lorazepam-reversible catatonia in the elderly can mimic dementia, coma and stroke

A ninety-year-old man was found in bed with his eyes closed, not arousing to any stimuli, including sternal rub. When his eyelids were opened to test pupillary responses he squeezed them shut. He abruptly awakened 3 h after receiving 1 mg of intramuscular lorazepam. He was given additional intravenous lorazepam and was put on a maintenance oral dose of 1 mg at bedtime. The initial impression of the medical staff was that this patient was suffering from a stroke, coma or irreversible dementia, but he actually had catatonia, a movement disorder arising from a variety of psychiatric and organic illnesses, characterised by mutism, immobility, and sometimes bizarre posturing [1, 2]. Often a single dose of a parenteral benzodiazepine completely reverses catatonia, simultaneously confirming the diagnosis and curing the problem [1]. Refractory catatonia is treated by electroconvulsive therapy [1]. When presented with acute or chronic unresponsiveness, always keep catatonia in the differential diagnosis.

Conflicts of Interest
None

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Mono-osteotic Paget’s disease of the hand

An 85-year-old lady presented with a painful swollen left hand. X-ray revealed an expanding 4th metacarpal as in Figure 1 with homogeneous sclerosis and areas of lucencies characteristic of Paget’s disease. The rest of the radiological skeletal survey and the bone biochemistry profile were normal. The pain eased with ibuprofen.

Figure 1. Paget’s disease involving 4th metacarpal bone.

Paget’s disease commonly involves multiple large bones of elderly people. Mono-osteotic involvement of hand has been only infrequently reported [1]. While phalanges are usually affected, metacarpal and carpal bones are rarely involved [2]. Usually, it is discovered incidentally on radiographs; however, some patients present with pain, swelling and rarely with pathological fractures [2, 3]. Total alkaline phosphatase is raised only when larger bones are affected [4] and in such cases bisphosphonates are useful to reduce bone turnover and relieve pain [5]. Anti-inflammatory agents are also indicated for pain relief. This disease needs to be considered in the differential diagnosis of expansile, subchondral lesions of the hand in the elderly.

Conflicts of Interest
There are no Conflicts of Interest.

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