

Article: 0047

Topic: S15 - Symposium 16: Psychopharmacotherapy at the interface of psychiatric and medical diseases

Psychopharmacotherapy in Endocrine and Metabolic Diseases

G. Laux¹

¹Institute of Psychological Medicine, Institute of Evidence-based Medicine in Psychopharmacotherapy, Haag i.OB, Germany

Psychiatric disorders can be caused or strongly associated by endocrine and metabolic diseases. Especially depressive and anxiety disorders can occur with hypoglycemia, diabetes mellitus, hypothyroidism, hyperthyroidism, hypoparathyroidism. Endocrinological alterations and disturbances in the HPA-/HPT-axis are consistent findings in depressive disorders. Type 2 diabetes is also associated with cognitive dysfunction. Database on pharmacotherapy is sparse and partly inconclusive due to low-quality trials and the heterogeneity of examined populations. In diabetes pts treatment with antidepressants showed clinically significant effects on depression outcomes, RCTs regarding maintenance therapy with SSRIs preventive effects for depression recurrence. On the other hand endocrine and metabolic side effects of psychotropics must be kept in mind. Second generation antipsychotics like risperidone, olanzapine or quetiapine are associated with hyperprolactinemia, hyperglycemia, impaired glucose metabolism, clinically with increased risk of metabolic syndromes, diabetes, amenorrhea, galactorrhea and sexual dysfunction. SSRIs have been associated with the syndrome of inappropriate antidiuretic hormone secretion. Lithium long-term treatment can lead to (subclinical) hypothyroidism. From a clinical point of view in some cases treatment with psychostimulants (i.e. methylphenidate) can help patients with medical diseases. Recommendations for the use of different psychotropics in endocrine and metabolic diseases are presented.