The following abstracts were presented as posters at the 2017 NEI Congress.

The material presented in this section contains the abstracts submitted as part of the poster session at the 2016 NEI Congress, Colorado Springs, CO, November 9-12, 2017.

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Congratulations to the scientific poster winners:

1st Place: #178—Gender Differences in Prodromal Symptoms of Dementia
2nd Place: #146—Effect of Heroin Use on Changes of Brain Functions As Measured by fMRI, a Systematic Review
3rd Place: #185—Second Generation Antipsychotics and Catatonia: A Literature Review

100 Reciprocal Relationship Between Olfactory Ability and Olfactory Hallucination
Usama Bardan1 (4th-year medical student); Stefany Kress, Bsc1 (Medical Student); and Alan R. Hirsch, MD1
1 Smell and Taste Treatment and Research Foundation, Chicago, IL

ABSTRACT: Introduction: Transient fluctuation of smell concurrent with phantosmia has not been reported. Four such cases are presented.


DISCUSSION: Olfactory ability should be assessed in those with phantosmia, both during and in the absence of hallucinated odors, to detect transient olfactory deficits in order to direct treatment towards this condition.

104 Valproate-Induced Hyperammonemic Encephalopathy: Case Studies
Dan Matthews, MD1; and Glenda Matthews, MD2
1 Corporate Director Of Neuropsychiatric Services, Universal Health Services, Inc, Austin, TX
2 Private Practice, Austin, Texas

ABSTRACT: BACKGROUND: Hyperammonemia and carnitine deficiency with concomitant encephalopathy have been reported to result from valproic acid administration (Coulter DL, J Child Neurol 1991Jan; 6(1); 7-14 and Mock, CM, et al, Am J Health Syst Pharm, 2012 Jan; 69(1):35-9). Although there have been numerous publications regarding this adverse event in the neurology literature, there have been very few reports published in the psychiatric literature. The reported incidence of hyperammonemia in children treated with valproate is 19%. It is important that prescribers be aware of the risk of valproic acid induced hyperammonemic encephalopathy, as well as its diagnosis and management.

OBJECTIVE: The current study explores the feasibility of reversing Valproate Induced Hyperammonemic Encephalopathy (VHE) by discontinuing valproic acid and normalizing the carnitine level via L-carnitine supplementation.