P03-76 - MILD ENCEPHALITIS INFLAMMATION SUBGROUPS IN AFFECTIVE AND SCHIZOPHRENIC DISORDERS

K. Bechter¹, H. Reiber², S. Herzog³, D. Fuchs⁴, H. Tumani⁵, H.G. Maxeiner¹

¹BKH Günzburg, Ulm University, Günzburg, ²University Goettingen, Goettingen, ³Justus-Liebig-University Giessen, Giessen, Germany, ⁴Innsbruck Medical University, Innsbruck, Austria, ⁵Ulm University, Ulm, Germany

Objectives: Low level inflammatory Mild Encephalitis (ME) mechanisms were suspected in a subgroup of treatment resistant hospitalised affective and schizophrenic spectrum disorder patients.

Methods: We analysed albumin, IgG, IgA, IgM, oligoclonal IgG and specific antibodies in paired cerebrospinal fluid (CSF) and serum samples from patients with affective (n=24) or schizophrenic spectrum disorders (n=39). Numerical and graphical interpretation of CSF protein data was performed by Reibergrams with reference to a large control group (n=4100).

Results: In 41% of the psychiatric patients (n=63) we observed CSF pathologies: 14% displayed intrathecal humoral immune responses, 10% slightly increased CSF cell counts (5-8/µL) and 29% had moderate blood-CSF barrier dysfunctions, in 24% as the only pathological sign with normal IgG, IgA and IgM concentrations in CSF (p= 0.9 testing the null hypothesis for intrathecal synthesis with reference to Qmean of the reference group). In the affective (n= 24) spectrum 20% displayed a systemic immune reaction as detected by oligoclonal IgG. In probable 6% of virusspecific, bacterial or autoimmune associated disorder with CNS involvement. Elevated CSF neopterin concentration in 34% of the patients was interpreted as an increased release from astrocytes or from other glia cells.

Conclusion: The low level immune response and barrier dysfunctions are discussed on the base of a ME pathomechanism in subgroups of psychiatric patients. CSF analysis is shown to be a useful diagnostic tool for differential diagnosis in psychiatric diseases.