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**PSYCHODERMATOLOGY** 

## CLINICAL PRESENTATIONS OF SOMATIC-TYPE DELUSIONAL DISORDER IN DERMATOLOGY

B De Souza (1) - A Mcmichael (1)

Wake Forest University School Of Medicine, Dermatology, Winston Salem, United States (1)

Introduction: The interplay between psychiatric and dermatologic conditions has been recognized for decades as evidenced by the widely accepted classification system of psychocutaneous disorders: (1) primary dermatologic disorder with psychiatric sequelae, (2) primary dermatologic disorders exacerbated by stress, (3) primary psychiatric disorder with dermatologic sequelae, and (4) miscellaneous. However, there is minimal literature on dermatologic patients presenting with concerns that a minor, treatable skin disorder is something more severe. This is a subtype of the third category, a somatic-type delusional disorder.

Objective: The aim of this study is to provide an algorithm for the diagnosis and management of somatic-type delusional disorder for dermatology providers.

Materials and Methods: Published cases were identified using Google Scholar and PubMed. The search strategy included the following key term: "delusional disorder somatic type". References of included papers and studies available in English were also included.

Results: 29,585 articles were retrieved with exclusion of overlapping studies and those evaluating conditions other than delusion disorder, somatic type. We identified traits (e.g. low socioeconomic status, middle age) 1, 2 that may precipitate this disorder in vulnerable patients. In addition, we found that there is no well-validated guideline for management. There are case reports and observational studies demonstrating success with antipsychotics and anti-depressant therapy as well as non-pharmacologic options3 and only one clinical trial comparing cognitive behavioral therapy to supportive psychotherapy.4 Yet, there is limited data comparing treatment responses among psychotropic drugs.

Conclusions: The lifetime prevalence of delusional disorder is 0.18% with this estimate expected to increase over the coming years.4,5 Many of these patients will present to a non-psychiatric, outpatient clinic for medical care. Thus, it is imperative that providers are able to identify the condition and manage the patient appropriately. To do so, additional research should be conducted to evaluate effective pharmacologic and non-pharmacologic therapies.





