Due to a General Medical Condition

HIV Infection

- 8 male:female infected
- 4 female:male new cases
- Mode of transmission shifting from male homosexual encounters (55%) to women and intravenous drug usage (24%)
- Common infections that herald AIDS: PCP, TB, repeated herpes zoster, candidiasis
- Neurocognitive changes common (up to 50%), need to differentiate full dementia from minor cognitive changes. Minor cognitive changes may not progress to dementia and can be seen in all stages. Dementia occurs almost exclusively as a late stage complication>
  
  Dementia:
  - Attention/concentration, speed of processing, abstract reasoning, visuospatial
  - Motoric, emotional, motivational changes
  - Present for a month and absence of delirium

Minor Cognitive Changes
- Impairment less than dementia
- Less features noted

- Differential Diagnoses include: delirium, depression, substance abuse, CNS infections (toxo, crypto, histo, neurosyphilis etc)
- Small percentage (number not given) develop psychosis
- Treatment is focused on ruling out secondary causes because no effective treatment is available. Symptomatic relief is the focus. HIV patients need lower doses of psychotropics (low and slow rule). With some minor cognitive changes (slow processing, inattention, decreased motivation) stimulants can be used.
- Other neurological diseases associated with HIV
  - Meningitis
  - Vacuolar Myelopathy
  - Neuropathies

Seroconversion and the first symptoms represent important points of psychological stress

Huntington’s Disease

- Onset age 35-40
- Autosomal dominant (trinucleotide)
- Male=female
- Chorea and dementia
- Personality changes usually first
- Suicide 7%
- Treatment is neuroleptics and antidepressants for depression
Fahr’s Disease
- Rare
- Calcification of the basal ganglia
- Psychosis first (age 30) then dementia (age 50)

Wilson’s Disease
- Autosomal recessive (chromosome 13)
- Decreased ceruloplasmin
- Onset in late teens (age 16)
- Personality changes and early dementia (may have psychosis)
- Copper deposits in liver, brain and cornea (Kayser Fleischer rings)

Multiple Sclerosis:
- Charcot’s Triad (dysarthria, tremer, nystagmus)
- The 3 Is (Incontinence, Impotence, Impairment of gait)
- Rare cognitive dysfunction
- Fatigue common often treated with pemoline
- Suicide 7.5 times greater
- Treatment with antidepressants that cause urinary retention should be avoided
- Occasional euphoria

Myasthenia Gravis
- Important in the differential of fatigue
- 90% are young women and old men
- normal CNS
- diplopia and ptosis but normal pupils