



Letter to the Editor

'Awakenings' in demented patients

Larsen and Ashleigh reported two schizophrenic patients who developed depressive episodes after recovery from their psychotic symptoms with risperidone medication.¹ We recently had experience with two demented patients with Alzheimer's disease (AD) who developed a similar depressive state after improvement of their delusions by donepezil medication.

A 74-year-old woman had gradually become amnesic, negligent of household affairs and developed delusions of theft. Administration of donepezil at 5 mg/day improved her delusions but she became depressive and worried about her life, considering herself to be too old and forgetful to live independently. Her anxiety became so severe that her son decided to live with her.

A 73-year-old woman had gradually become forgetful and developed delusions of theft. Her delusions were completely cured after administration of donepezil at 5 mg/day. However, she became depressive and considered herself so forgetful that she was unable to live without her son's assistance. Although she had expressed reluctance to be cared for by her son before receiving donepezil, she accepted his willing support.

It has been suggested that acetylcholinesterase inhibitors might produce depressive symptoms.² For example, intravenous infusion of a cholinergic agonist has been reported to cause depressive episodes in patients with AD³ and another acetylcholinesterase inhibitor, physostigmine, has also been reported to cause a depressive state in patients with affective disorder.⁴

The depressive symptoms in the present patients had not been observed before they became amnesic, and did not occur either acutely or as a result of toxic reactions. These symptoms developed after their delusions had disappeared. It can be considered that the improvement of the patients' psychotic symptoms enabled them to realize their current circumstances,

and that they became depressive when confronted with their true situation. These episodes resemble the phenomenon of 'awakening' observed in schizophrenics whose hallucinations and/or delusions are markedly alleviated due to administration of risperidone.¹ When psychotic symptoms are significantly reduced, a patient may experience what Oliver Sacks has called 'awakening', not only to a new mental state but also a novel set of challenges.⁵ There may be common underlying pathophysiological mechanisms in patients who develop depressive states after improvement of psychotic symptoms. If so, it will be necessary to develop better ways of helping patients adapt to the emotional upheaval that comes with symptom improvement,⁶ not only in schizophrenia but also in dementia.

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