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LATE-ONSET SCHIZOPHRENIA: REVIEW AND CASE STUDY

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Introduction: Although schizophrenia is generally regarded as an illness with onset in late adolescence or early adult life, a sizeable minority of patients first become ill in middle or old age. Inconsistencies in diagnostic systems and nomenclature have led to such cases occupying an ambiguous position in relation to schizophrenia.
Objectives: To present a case study describing a late-onset schizophrenia and to clarify the position of this diagnose in the current nosology.
Aims: The concept, nosological status, diagnostic and associated clinical features involved in late-onset schizophrenia are reviewed.
Methods: A case report is presented in detail and a literature review of the theme is surveyed.
Results: We report a case of a 66-year-old woman with no psychiatric background up until 2010 when she was compulsively admitted to our department due to a clinical picture, which she has been developing since 2008, of mystical and persecutory delusions and visual and auditory hallucinations (she believed she was persecuted by little witches whom insulted her and invaded her home). This led to a behavioral disturbance with intense aggressiveness and anguish. The neuropsychological evaluation didn't detect any cognitive impairment. She was treated with high doses of an antipsychotic and discharged being medicated with injectable antipsychotic and followed in compulsory treatment.
Conclusions: In terms of epidemiology, symptom profile, and identified pathophysiology, the diagnose of late-onset schizophrenia (illness onset after 40 years of age) has face validity and clinical utility. General adoption of this category will foster systematic investigation of such patients.

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