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Introduction

A 29-year-old single African American male with a history of schizoaffective disorder, bipolar type was admitted to the Inpatient Psychiatric Unit due to increased commanding and persecutory auditory hallucinations prompting him to kill himself. Patient was already on oral Paliperidone 6mg (3mg q12h) daily along with Paliperidone Sustenna intramuscular injection 156mg, administered 12 days prior to his admission.

Case details

Patient's oral Paliperidone was increased to 9mg (3mg qam & 6mg qhs) daily and he reported significant improving. On day #6 and after the patient was given his morning dose of Paliperidone, he had an episode of OGC. The patient was given diphenhydramine 50mg intramuscular injection and the episode resolved. The oral Paliperidone was held for 24 hours, and the following dose was reduced to 6mg (3mg q12h) daily but after the patient was given the 3mg dose of Paliperidone, he had another episode of OGC. Once again, the patient was given diphenhydramine 50mg intramuscular injection and the symptoms resolved. The oral Paliperidone was discontinued and patient was started on Olanzapine which he tolerated. The patient was stabilized on Olanzapine and was later discharged.

Discussion

Oculogyric crisis (OGC) is a rare, acute dystonic phenomenon involving the extraocular muscles, characterized by persistent upward deviation of the eyes (1). The onset is often abrupt and lasts minutes to hours (1). Research suggests neuroleptics are commonly implicated but there are other reported etiologies (3). OGC is rarely reported with Paliperidone in the literature. Research suggests that neuroleptic induced OGC usually occurs within 4 days of starting or changing the dosage of the causative drug (2). However, there are reported cases in which the first episode has occurred up to two months after the change in medication. The management of drug induced OGC involves the discontinuation or reduction of the neuroleptic and the administration of an anticholinergic agent.

Image 1: Sustained conjugate upwards deviation of the eyes



Image 2: After treatment eyes at primer position



Conclusion

OGC is associated with Paliperidone administration. OGC can adversely impact the compliance and prognosis of the primary illness. Therefore, it needs to be managed at earlier stages with appropriate medication, primarily anticholinergics.

References

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3. Gardner DM, Abidi S, Ursuliak Z, Morrison J, Teehan MD, Tibbo PG. Incidence of Oculogyric Crisis and Long-Term Outcomes With Second-Generation Antipsychotics in a First-Episode Psychosis Program. *J Clin Psychopharmacol.* 2015 Dec;35(6):715-8. doi: 10.1097/JCP.0000000000000411. PMID: 26485339
4. Image 1: <https://europepmc.org/article/med/30524493>
5. Image 2: <https://europepmc.org/article/med/30524493>