

P-574 - HIGH CPK LEVELS IN PLASMA- BUT NOT NMS? FOLLOW UP STUDY OF 70 PATIENTS IN URGENT PSYCHIATRY

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Creatin phosphokinase enzymes showed high levels when happened infarctus myocardi, rhabdomyolises, and neurolept malignant syndrome. NMS is life threatening neurological disorder often caused as adverse reaction of use neuroleptics. its usually presented with high body temperature over 38C, rigidity of muscles, confusion or altered consciousness, autonomic imbalance, cpk elevated plasma levels and diaphoresis known as sweat shock. NMS can get peak of intensity in as little as 3 days if not treated and can lead to death.

In our study we traced levels of cpk, crp, liver enzymes among 70 patients after admission in urgent psychiatry had the same parameters after one month. Among all patients, the first group 10 persons diagnosed as f20, during admission had got one amp of haloperidol im plus one amp lorazepam im. CPK were 4500 to 5000, the second group diagnosed as f25, 40 persons got the same therapy. cpk were 2600 to 3000, the third group diagnosed as f18, heroin iv addicts tried ts with tablets but not neuroleptics and cpk were 5000 to 6000, crp 70, hepatitis b.c. many scars on their skin were noticed.

After one month on intensive treatment in the first group cpk levels fell to 450, in the second group cpk normalized, and in the third group cpk stayed extremely high as were at start.

We didn't observe other symptoms of NMS, just cpk. so the question is what exactly means high levels of cpk in psychiatry without using neuroleptics? these patients had been got therapy, as mentioned just one day, the first day of admission.

Conclusion 10% are sensitive.