

worsening paranoia had resulted in termination of his visiting nurse services that administered injections and in home assessments, his outpatient psychiatrist allowed him to self-administer bi-monthly injections. Over three weeks in the hospital, he was evaluated for signs and symptoms of antipsychotic overdose.

RESULTS: Initial literature review did not reveal information involving an overdose of injectable Risperidone. Thus, the time frame and symptoms to monitor were uncertain. As the injectable medication was expected to peak in 2-3 weeks and persist for 4-6 weeks, there was a concern about delayed potential side effects such as EPS, sedation, QTC prolongation and electrolytes imbalances. He was treated with oral antipsychotic medication. Clozapine and doxepin were discontinued due to patient non-adherence, side effects, and drug interactions. He exhibited signs of EPS and was started on benztropine. To simplify his regimen, he was switched to another long acting injectable, Paliperidone Palmitate, prior to his discharge.

CONCLUSIONS: Given the nature of the presentation, he was advised not to self-administer injectable medication and was referred for visiting nurse services. He was educated on the potential side effects of injectable antipsychotic medication. As there was a change in antipsychotic medications, follow up was recommended in an intensive outpatient program for psychotic symptoms and prolonged side effects. Due to the patient's concordant episode of loss of consciousness, he was advised to follow up with an outpatient long term EEG monitoring and complete Neurology evaluation.

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AXONA (Caprylidene): Medical Food Therapy For Alzheimer's Disease

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OBJECTIVES: Evaluate the current novel food therapy for Alzheimer and its adverse effects. What is the response to Axona (Caprylidene) in different ethnicities and determine the generalizability of the drug use in diverse populations. What genes are linked with positive responses? What are the implications of its use in high risk populations? Its role in early detection of Alzheimer's and the arrest of the neurodegeneration in APO E4 (-) patients.

METHOD: PubMed was queried with the search terms 'Axona' OR 'Caprylidene' and the following articles were collected and reviewed.

RESULTS: Among the articles collected and reviewed, two studies extensively evaluated the safety and efficacy of using Medium Chain Triglycerides (MCT) in Alzheimer's disease. These studies genotyped patients for APO E4 status (positive/negative). According to the Reger et al. study in 2002, treatment of APOE4 (-ve) patients with MCTs reported a considerable improvement in comparison to placebo-treated patients (P=0.04). The second study by Henderson et al. in 2009 demonstrated an improvement in cognitive functioning determined by Alzheimer's disease Assessment Scale- cognitive subscale (ADAS-Cog) scores in those treated with MCTs versus placebo in APOE4 -ve patients. An open label Japanese pilot study also showed improvement in cognitive functioning with Caprylidene in APOE4 (-ve) patients with Mini Mental Status Exam (MMSE) score > 14.

DISCUSSION: The FDA approved treatment options in Alzheimer's disease include acetylcholinesterase inhibitors (Rivastigmine, Donepezil and Galantamine), NMDA receptor antagonist (Memantine). These drugs only delay the progression of the disease in these patients. MCTs are classified as medical foods, which are defined as substances that provide a specific nutritional need in a patient that cannot be satisfied by modification of a normal diet alone. The FDA approved Axona as medical food for specific dietary management of the disease in 2009. Early metabolic changes in Alzheimer's Disease prior to cognitive decline and plaque deposition can possibly be prevented by early intervention with Axona, especially in high risk population (APOE4 (p), Downs syndrome).

These trials highlight the benefits of MCT in a discrete group, and the importance of routine genomic testing in Alzheimer patients in clinical settings. A better understanding into Caprylidene's pharmacokinetics and pharmacodynamics will help us in the prevention and intervention of patients based on their genetic profiles.

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Second Generation Antipsychotics and Catatonia: A Literature Review

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