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A Borderline Personnality Disorder and Autoimmue Thyroiditis: A Case Report

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Abstract	Case Report

The association between autoimmune thyroiditis and encephalopathy is rare and well known. A case report of a patient with bordeline disoder (BLD) with fluctuanting mood and psychotic symptoms using double blind method shows a significant relationship between psychotic symptoms and fluctuanting antithyroid anto immnune antibody titers [1]. We report here a case of patient with BLD and autoimmune thyroiditis. Improvement of BLD traits is obtained after adding thyroid hormones replacement therapy to psychotropic medication.

Keywords: Thyroiditis and encephalopathy, Bordeline Disoder (BLD), Thyroid, Hormones.

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INTRODUCTION

Thyroid dysfonction is common in major psychiatric disorders. The association between thyroid dysfonction T3 level and violent agressive behavior may be valid in patients with BLD [2]. We report a case of female patient with BLD whose fluctuanting mood and psychotic symptoms and no clinical response to sustained psychotropic medication were linked to autoimmune thyroiditis.

PATIENT AND OBSERVATION

Mrs F. age 20, divorced and mother of 2 children; with charged pathological history: behavioral disorder, agitation, impulsivity, repeated suicide attempts, behavior sexual risks and use of psychoactive substances. No significant improvement is observed with sustained psychotropic medication (3 years medical follow-up) including neuroleptics, antidepressants and anxiolytics.

The interview found intolerance to frustration, chronic feelings of emptiness, emotional instability in reaction to day to day events, unstable and intense interpersonal relationship, inappropriate and intense anger, self -harming behavior and tansient and stress related paranoid ideation. The diagnosis of BLD was retained according to DSM5. A brain CT scan was requested returned with no abnormalities. But a standard biological assessment revealed a very high TSH; T3 and T4 collapsed.

A endocrinologist advice concluded to an autoimmune thyroiditis [Hashimoto thyroiditis] confirmed by the presence of positive antibodies TPO and an ultrasound examination.

Thyroid hormones replacement therapy was initiated in association with olanzapine 15 mg, paroxetine 40 mg and lorazepam 5mg.

The evolution, after 2 months and 12 months follow-up, was marked by an improvement in self - harming behavior, impulsivity and psychotic symptoms.

DISCUSSION

This case evaluation revealed a relationship between borderline psychopathology and autooimmune thyroiditis in patient with BLD as determined by the the improvement of the three dimensions (self -harming behavior, impulsivity and psychotic symptoms) after the thyroid hormones replacement therapy.

Earlier studies report the association between thyroid dysfonction and violent behavior. A clinically significant and longitudinal correlation between fluctuanting antithyroid antibodies titers and symptoms

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of borderline psychopathology especially depressive and psychotic symptoms; serially determined over an inpatient period of 275 days rated; using double blind method [1]. An other study demonstrate a significant correlation between high T3 levels and agressive or violent behavior in sample of 92 euthyroid women with borderline disorder compared to 54 healthy women [2].

The neurobiological mechanisms underlying or correlating with these personnality traits have not been fully charaterized. The hypothalamo -pituitary-thyroid axis involvement in relation with agressive personnality traits may indicate involvement of altered thyroid hormones in clinical endophenotypes characterized by agressive, impulsive and suicidal behaviors [3].

The autoantibody linked to borderline psychopathology represents in part a subencephalopathic auto-immune mediated changes in brain function [1]. Hashimato encephalopathy often responds clinically to glucocorticoids but not necessary to exogenous thyroid homones [1]. In our patient, improvement of 3 dimensions of borderline psychpathology is observed after adding thyroid hormones replacement therapy to psychotropic medication

REFERENCES

- Geracioti, T. D., Kling, M. A., Post, R. M., & Gold, P. W. (2003). Antithyroid antibody-linked symptoms in borderline personality disorder. *Endocrine*, 21(2), 153-158.
- Sinai, C., Hirvikoski, T., Nordström, A. L., Nordström, P., Nilsonne, Å., Wilczek, A., ... & Jokinen, J. (2015). Thyroid hormones and adult interpersonal violence among women with borderline personality disorder. *Psychiatry research*, 227(2-3), 253-257.
- Pompili, M., Gibiino, S., Innamorati, M., Serafini, G., Del Casale, A., De Risio, L., ... & Girardi, P. (2012). Prolactin and thyroid hormone levels are associated with suicide attempts in psychiatric patients. *Psychiatry research*, 200(2-3), 389-394.