

Mefloquine

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Psychosis: case report

A 64-year-old man developed psychosis during treatment with mefloquine for progressive multifocal leukoencephalopathy (PML).

The man was presented with acute worsening of progressive neurological decline that started in late December 2020. On 30 November 2020, he was diagnosed with coronavirus disease 2019 (COVID-19). Except for prolonged fatigue, he recovered fully and saw his primary care provider in January. His wife noticed memory problems in late December or early January 2021, and was diagnosed with suspected post-COVID brain fog. Over the next few months, the cognition gradually deteriorated, accompanied by vision problems and reading difficulties. According to his wife, his mental state fluctuated greatly, and he had difficulties conversing. He gradually became unable to retain his equilibrium and hurt his wrist. His right leg began to shake shortly after that. His wife subsequently requested that he was evaluated at a tertiary center for further examination, and the team had evaluated his condition in April 2021. Subsequently, he was diagnosed with PML. Concurrently, he had Cunningham virus (JCV) infection. On 16 April 2021, he started receiving mefloquine 250mg [*route not stated*]. However, he developed psychosis including panic attacks, anxiety, insomnia, and delusions [*duration of treatment to reaction onset and outcome not stated*].

The man's treatment with mefloquine was discontinued. Mirtazapine was continued and alprazolam [Xanax] was started for anxiety and agitation. On 19 April 2021, he started receiving Immune-globulin and pegfilgrastim and he was discharged to rehabilitation. The treatment began in May 2021, with a five-cycle schedule based on little data in the literature suggesting potential benefits. The plan was to boost immunological reconstitution before repeating MRI brain imaging. His wife reports significant symptomatic improvement in terms of ability to use his right arm and leg, resolution of tremors, ability to ambulate independently, and more engagement in conversations, with some occasional frustration regarding cognitive difficulties, but remains quite encouraged. He does suggest [paracetamol] for myalgias, fatigue that lasts a week after each cycle, and joint discomfort, and he takes it as needed.

Sriwastava S, et al. Progressive multifocal leukoencephalopathy in an immunocompetent patient: A case report and review of literature. [Review]. Journal of Medical Virology 94: 2860-2869, No. 6, Jun 2022. Available from: URL: <http://doi.org/10.1002/jmv.27493> 803663509