

**PREVALENCE AND RISK FACTORS FOR PSYCHIATRIC DISORDERS IN TEMPORAL LOBE EPILEPSY (ABSTRACT)*.
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Introduction: Psychiatric comorbidities have a direct impact over quality of life in epileptic patients. Psychiatric disorders are frequently associated to epilepsy, although epidemiologic data are not yet clear, probably due to methodologic problems. Many risk factors were implicated in this association, but the issue remains controversive. Psychiatric disorders and temporal lobe epilepsy (TLE) may share common structural and functional abnormalities involving the limbic system. A functional polymorphism (Val66Met) of the Brain-Derived Neurotrophic Factor (BDNF – a protein involved with neuronal development and protection) gene, has been associated to many neuropsychiatric disorders, although a direct relation with epilepsy is less clear.

Objective: To determine the prevalence and risk factors for psychiatric disorders in TLE, and to study the impact of Val66Met in developing TLE, as well as its possible influences over clinical and EEG variables.

Method: 98 patients with TLE (59 women and 39 men, mean age 43 years old, mean epilepsy duration 25 years) and 163 controls were accessed by the Structured Clinical Interview for DSM-IV (SCID). Frequencies of Val66Met in TLE patients and controls were compared, and possible influences of this polymorphism over severity of seizures and EEG features were studied. Categorical variables were analyzed by the Fisher's exact test and numerical variables by the Student t-test.

Results: 54% of patients had a psychiatric diagnosis, distributed in the following frequencies: mood disorders (42%), anxiety disorders (18%), psychotic disorders and substance abuse (6% each). Two variables were identified as risk factors for mood disorders: positive psychiatric family history ($p=0.002$) and left-sided irritative focus on EEG ($p=0.03$). There were no differences in Val66Met polymorphism frequencies between patient and control groups ($p=0.25$). The presence of the Met allele didn't influence any clinical or EEG variable of TLE.

Conclusion: Prevalence of psychiatric disorders in TLE is elevated. Mood disorders, the most frequent psychiatric comorbidities, are associated with two independent risk factors. Val66Met polymorphism of the BDNF gene seems to have no direct impact over TLE. More detailed studies with selected populations and accessing other clinical variables should further clarify this issue.

Key words: epilepsy, psychiatric disorders, comorbidities, BDNF, Val66Met.

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