

What can be done to prevent patients from being placed in hospice when they actually have catatonia?

Dr. McCall:

Anybody that has significant motor symptoms or neuromuscular symptoms, and especially in later life, don't necessarily assume that they're having dementia. When we think about what distinguishes the diagnosis of catatonia — stupor or excitement — as opposed to any other psychiatric diagnosis, it really comes, in my opinion, down to this: Most psychiatric diagnoses lean very heavily on what the patient is saying. For example, a patient with severe depression can come in your office and, strikingly, they can look pretty normal. They don't necessarily look very depressed, but what they tell you about themselves is shockingly depressing. But they don't look any different than anyone else walking down the street.

So most psychiatric diagnoses lean very heavily upon the content of the story the patient's telling. Catatonia is distinctly different in this regard. It is heavily dependent upon observing the patient. What the patient says can be important, especially if it's self-derogatory or something indicating a mood disorder, but you really should be leaning heavily upon observable behavior. Is the patient not moving enough, moving too much? Are they in an odd body position? Things of this nature. Are they moving their mouth or smacking their lips in some sort of odd way or have stereotypic, repetitive behaviors that just don't make any sense?

In looking at a person that you think is basically a helpless case, you may think this person has advanced dementia of some sort. Don't simply rely upon their inability to produce speech, and then assume that because they can't speak well, they must have lost their mental facilities or mental faculties. Instead, look at the total, observable picture — especially all the motor signs — and if you see any kind of motor sign, even one, such as marked rigidity in all extremities. Or odd posturing or stereotypic weird movements over and over again, consideration of catatonic stupor is in order.