

THE SELF-FULFILLING PROPHECY: LATE-ONSET PSYCHOTIC DEPRESSION WITH SOMATIC DELUSIONS LEADING TO A CANCER DIAGNOSIS

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OBJECTIVE: Late-onset psychotic depression is frequently underdiagnosed and undertreated, especially when predominant somatic delusions lead to unnecessary medical evaluations and delayed psychiatric intervention. This case report presents a 66-year-old patient with late-onset psychotic depression and severe somatic delusions.

CASE: A 66-year-old male with no prior psychiatric history developed abdominal pain, social withdrawal, and anhedonia following a COVID-19 infection. His symptoms worsened over months, leading to severe somatic delusions, including believing he could not urinate or defecate and that eating would cause him to explode. Notably, his father had died of gastric cancer at a similar age, and despite one year of repeated medical evaluations with no pathology found, he remained convinced of having cancer. His fear progressively worsened, contributing to functional decline and significant weight loss. His family sought psychiatric consultation repeatedly; however, poor medication adherence led to no improvement. He was eventually hospitalized in a psychiatric unit and referred for ECT due to treatment-resistant psychotic depression. At admission, he was on venlafaxine 150

mg/day and olanzapine 10 mg/day. Venlafaxine was switched to sertraline 50 mg/day, and olanzapine was increased to 15 mg/day. The patient received eight ECT sessions, resulting in marked improvement—his weight increased from 51.6 to 58 kg, his somatic delusions resolved, and his self-care improved. During hospitalization, a cervical swelling was noticed after he resumed shaving. Initially suspected as an abscess, further imaging revealed hypoechoic, heterogeneous vascular lesions, later diagnosed as gingival squamous cell carcinoma. Despite the malignancy, he remained psychiatrically stable at follow-up with escitalopram 10 mg/day and olanzapine 5 mg/day.

DISCUSSION: Late-onset psychotic depression can present with severe somatic delusions, leading to misdiagnosis and delayed psychiatric care. This case highlights the role of ECT in treatment-resistant depression and the need for a multidisciplinary approach, as psychiatric symptoms may mask underlying medical conditions.

Keywords: Electroconvulsive therapy, late-onset depression, psychotic features, somatic delusions