

Prader-Willi 증후군의 Fluoxetine 치험 1례*

A CASE OF PRADER-WILLI SYNDROME TREATED WITH FLUOXETINE

신 동 원** · 송 동 호**†

Dong-Won Shin, M.D.,** Dong-Ho Song, M.D.**†

요 약 : Prader - Willi (Prader - Willi Syndrome, PWS) 50 - 70% (hypotonia), (areflexia), (feeding difficulty), (hypothermia), (microgenitalia), (hypoplastic scrotum), (polyphagia), (hypogonadism) 가 14 PWS 2 (fluoxetine) 가 Fluoxetine 가

중심 단어 : Prader - Willi · Fluoxetine.

서 론

Prader - Willi (Prader - Willi Syndrome, PWS) 가 (poly - 1956 Prader Willi phagia), (short stature), (hypogonadism) (hypotonia), (areflexia), (feeding difficulty), (hypothermia), (microgenitalia) (strabismus), (Prader 1956). PWS 가 10,000 25,000 PWS 1% (Greenswag , PWS가 Alexander 1988 ; Ledbetter 1987). PWS . Developmental milestone

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Department of Psychiatry, College of Medicine, Yonsei University, Seoul

†Corresponding author

가
가
Fluoxetine 9 3
가

2) 퇴원후의 행동문제와 행동요법
2 70kg 가

5 가 고 찰
' ?'
7 가

80mg 가 fluoxetine 가 PWS
가 가
가 PWS
(Holm 1981).

가

3) 퇴원후의 약물치료 효과
3 PWS (Coplin 1976 ; Holm Pipes 1976 ; Dech Budow 1991 ; Warnock Kestenbaum 1992 ; Benjamin Buot-Smith 1993).
3 가 PWS
50 70% 15 (父
Fluoxetine 系) PWS
3 가 가 hydrocarbon (Strakowski Butler
가 fluoxetine 80 1987).
6 가 Fluoxetine (polymerase chain reaction)
6 가 가 PWS 30 50%
가 가 fluoxetine (Butler

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ABSTRACT

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Dong-Won Shin, M.D., Dong-Ho Song, M.D.

Department of Psychiatry, College of Medicine, Yonsei University, Seoul

Prader Willi Syndrome(PWS) was first recognized and reported by Prader-Willi. The etiology of the syndrome is not fully understood, but 50 -70% of the patients show small deletion in chromosome 15. Manifested symptoms vary according to developmental age. In early life, hypotonia, areflexia, feeding difficulties, hypothermia, microgenitalia, hypoplastic scrotum, cryptorchidism were observed. But in several years, hypotonia disappears, and polyphagia, decreased satiety, psychomotor retardation, obesity, hypogonadism and short stature become main problems. Behavioural problems including temper and aggressive outbursts, stealing food, hoarding food, and self excoriating skin picking, trichotillomania are more prominent during adolescence and young adulthood. Also, irritable, depressed mood are described. Lots of psychological and behavioural problems explain the reason why psychiatrists have managed and reported this syndrome. However, there has been no official report of PWS in our country. So authors report the clinical characteristics and issues in management of a patient with PWS.

KEY WORDS : Prader-Willi Syndrome · Clinical characteristics · Fluoxetine.