

Self-Mutilation in a Known Case of CHARGE Syndrome

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Image Description

Self-mutilation in a known case of CHARGE syndrome The patient is an 8 years old girl known case of CHARGE syndrome diagnosed by genetic test, referred to psychiatry clinic with complaint of self-picking (excoriation) and self-mutilation, by her mother (FIG. 1). In psychiatry interview the patient had no eye or verbal contact and kept her face down. Obvious strabismus, autistic-like behavior and small size ears were noticeable. There was no evidence or complaint of hyperactivity, anxiety, stress or restlessness. The patient reminds a history of seizure but she does not use any medication at the moment. CHARGE syndrome is a rare, sporadic, and autosomal dominant multi-systemic and complex genetic disorder which is associated with CHD7 mutation in 2/3 of cases. CHARGE association was first described by Hall et al in 1979 in 17 patients and in the same year by Hittner et al in 10 cases, thus it is also called Hall-Hittner syndrome too [1]. CHARGE syndrome is an abbreviation of Coloboma, Heart defect, Atresia chonae, Retarded growth and development, Genital hypoplasia and ear anomalies or deafness [2]. Based on our knowledge there is no case of self-mutilation and CHARGE syndrome reported.



FIG. 1. Patient's Face with Visible Self-Mutilation Scar in Left Upper Side of the Forehead.

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Conflict of Interest

No

Authors' Contribution

Arian Naghedi wrote primary draft. Reza Bidaki visited the patient and take history from her mother. He take consent from mother for take a picture and presentation of her problem. He design the study, edited and submitted it.

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