Letter to the Editor

Propolis Induced Mania with Psychotic Features: A Case Report

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Dear Editor,

Propolis is a substance produced by bees from botanical sources. It is used for keeping the inside of the hive clean and to insulate its structure. The long history of medicinal use of propolis by humans has attracted significant research interest, which may be due to its widely reported biological properties, including antiviral, antifungal, antibacterial, anti-inflammatory, antioxidant, and anticarcinogenic effects¹. From ancient times, propolis has been used to treat disorders such as throat and urinary tract infections, eczema, ulcers, and halitosis. In Anatolia, traditionally it has been applied to treat skin problems, wounds and sores in humans and farm animals². In addition to useful properties of propolis, toxic and allergic side effects have also been reported³,⁴. While cases of psychiatric disorders caused by the application of herbal products have been known⁵,⁶, there is no data about psychiatric symptoms related to propolis use. Here we report the case of a 34-year-old man displaying manic symptoms triggered by the ingestion of high doses of propolis.

Case

A thirty-four-year-old male patient working as a farmer and beekeeper, with no prior history of any psychiatric disease, was admitted to the care of a neurologist complaining of amnesia. Neurologic examination revealed no pathology. However, incidentally cranial computerized tomography determined signs of the Dandy-Walker variant. The patient had been using high dose propolis (nearly 50 grams/day) for three days to strengthen his memory. A few days later, symptoms developed, including an increase in his usual prayers, a feeling of grandiosity, persecutory delusions, decreased need to sleep and decreased appetite. His father took him to a state hospital, where olanzapine treatment (10 mg/day) was started. When there was no alleviation of the manic symptoms three days later, the patient was referred to our outpatient clinic. Bipolar disorder, most recent episode mania with psychotic features was diagnosed and he was hospitalized. Physical and neurological examinations were normal. Routine laboratory tests (including total blood count, serum electrolytes, kidney, liver, and thyroid functions) were unremarkable. Administration of lithium (900 milligrams/day), olanzapine (15 milligrams/day) and lorazepam (2.5 milligrams/day) was started. On the 10th day of hospitalization, the manic symptoms were reduced significantly. Lorazepam treatment was gradually stopped and he was discharged on the 16th day of hospitalization. At the follow-up on the 15th day after his discharge, no signs of mania were detected.

Discussion

One literature study estimated the safe dose of propolis in adult humans to be 70 mg/day³. While it is safe to use lower doses, with a dosage of over 15 g/day allergic side effects such as irritation of the skin and the mucous membranes can be seen. No reports of psychiatric symptoms due to high dose propolis use were found in the literature. Obviously we could not determine the ingredients of the propolis our patient had

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Propolis can contain the resins of many different plants that may cause psychiatric problems. In the present case, given the absence of a prior personal or family history of psychiatric illness, we believe that the high dose of propolis may have been the triggering factor of the diagnosed manic symptoms with psychotic features.

References:

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H.O., T.U.: The author reported no conflict of interest related to this letter.