

## Postoperative conversion disorder in severe anorexia nervosa

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### To the Editor:

We had a case of a 45-year-old woman with history of 25 years of anorexia nervosa, whose body mass index was 15.1 kg/m<sup>2</sup>. She underwent posterior cervical spinal fusion to improve spondylolisthesis. Recovery from anesthesia was delayed and sursumversion was observed. In addition, the patient complained of paralysis of the left arm post-operatively. No distinctive positive findings including cerebral hemorrhage or spinal abnormality on the basis of cranial computed tomography and magnetic resonance imaging were found. A few days of observation revealed that she was able to move her hands while sleeping. Finally, we diagnosed her symptoms as postoperative conversion disorder.

Conversion disorder is described as a psychological disorder, characterised by somatic symptoms with no physiological abnormalities, but with an underlying

psychological basis [1, 2]. Our patient had the risk factors for conversion disorder, which include a previous physical disability such as anorexia nervosa, and a tendency to occur in adolescent or young adult females under 50 years of age.

Because surgery for severe anorexia nervosa patients is increasing in the 2000s [2], anesthesiologists may encounter postoperative conversion disorder as a stroke mimic or surgical complication.

**Conflict of interest** There are no conflicts of interest for either author.

### References

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