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Saturday

Criminal behaviors in Frontotemporal Dementia: A case report

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State of the art: Criminal behaviors in Frontotemporal Dementia (FTD) result in negative legal and biopsychosocial outcomes. State-of-the-art genetic testing can establish a hereditary FTD diagnosis. Early diagnosis is critical in managing FTD and avoiding adverse outcomes.

Methodology: Case report of progressive behavioral decline and criminal behaviors that led to incarceration. We describe the clinical, genetic, neuroimaging and neuropathologic results.

Results: The proband had normal growth and development until around age 30 when he developed disproportionate irritability and anger that were attributed to stresses in marriage and work. Over the next 10 years he became increasingly abusive and violent towards his wife and children and the marriage ended in divorce. Over the next several years his behaviors escalated, including racist behaviors and constant threats to coworkers about his "hit list," leading to a restraining order. Refusal to cooperate with police and SWAT led to incarceration for a few years, and then homelessness upon release from prison. Multiple other family members had developed cognitive/behavioral changes in the 30- to 60-year age range. Genetic testing revealed the V337M mutation in *MAPT*. Severe bilateral temporal and frontal changes were present on brain MRI and FDG-PET; Tau-PET showed high tracer binding in bilateral frontal and temporal cortex. He was diagnosed with behavioral variant FTD at age 60 and died at age 70. Autopsy showed widespread tau+ neurofibrillary tangle pathology, particularly in the temporal lobe.

Conclusion: The criminal behaviors leading to incarceration were in retrospect very likely associated with an undiagnosed genetic form of FTD.

Conflicts of interest

I receive NIH funding for research.