

A Case Report of Gitelman Syndrome in an adult Filipino presenting with Hypokalemic Periodic Paralysis

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Introduction: Gitelman Syndrome or Familial Hypokalemia-Hypomagnesemia is a rare salt losing renal tubular disorder which can present with salt craving, nocturia, muscle weakness or paralysis. This report presents a case of a young adult Filipino with hypokalemic periodic paralysis.
Case Presentation: A 30 year old Filipino presented with recurrent episodes of body weakness associated with hypokalemia. Work-ups during admission revealed presence of hypokalemic metabolic alkalosis, hypomagnesemia, and hypocalciuria which are consistent with findings of Gitelman Syndrome. Provision of potassium replacement therapy improved potassium level and motor strength.
Conclusion: Gitelman Syndrome is a benign renal tubular disorder that is associated with episodes of hypokalemia with symptoms such as muscle weakness or paralysis. Main features of Gitelman Syndrome are hypokalemia, metabolic alkalosis, hypomagnesemia, and hypocalciuria. Genetic testing is still needed to confirm diagnosis. Definitive treatment is not yet established. Symptoms are likely to recur despite replacement therapy of deficient electrolyte.

Biography

Aldrin John S. Almario has completed his medical degree in the year 2015 at the age of 25 from the University of the East – Ramon Magsaysay Memorial Medical Center. He is currently a Level III Internal Medicine Resident at the Bulacan Medical Center.

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