P18

Two Cases of Hypokalemic Rhabdomyolysis Due to Thiazide Treatment

가톨릭대학교 의과대학 내과학교실

신승환 · 손덕승 · 김길선 · 김영수 · 윤선애 · 장윤식 · 김영옥

Hypokalemia is a common metabolic cause of rhabdomyolysis. Although thiazide causes hypokalemia frequently, hypokalemic rhabdomyolysis by thiazide treatment is very rare.

Here we report two cases of hypokalemic rhabdomyolysis due to thiazide treatment. A 50-year-old woman who had been treated with thiazide for hypertension was admitted due to quadriplegia. The patient's potassium level was 1.5 mEq/L, creatinine phosphokinase (CPK) 21,346 IU/L, and lactic dehydrogenase (LDH) 2,389 IU/L, respectively. A 80-year-old man who had been treated with thiazide for hypertension was admitted due to generalized weakness. The patient's potassium level was 1.9 mEq/L, CPK 29,000 IU/L, and LDH 2,393 IU/L, respectively. There were no any other causes of rhabdomyolysis except hypokalemia due to thiazide treatment in both patients. With adequate hydration and potassium replcaement, hypokalemic rhabdomyolysis recovered completely without sequele.