

급성뇌경색이 동반된 환자에서 발생한 갑상선 기능저하로 인한 횡문근 용해증 환자의 증례 보고

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The Rhabdomyolysis Caused by the Hypothyroidism in the Patient with Acute Cerebral Infarction: Case Report and Review of Literature

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Cause of rhabdomyolysis include severe infections, including sepsis, trauma, metabolic disorders, drugs, electrolyte abnormalities, and also hypothyroidism in rare cases. Moreover, accompany with acute ischemic stroke is a very rare. A 56-year-old man was admitted to the ER, who presented with right side weakness, dysarthria and general weakness occurred after sleep. He denied any previous medical and drug medication history. We found newly developed acute infarction at parietopontine tract near left thalamus in brain MRI, and creatinine kinase (CK), trasaminases, myoglobin and lactate dehydrogenase (LDH) were elevated. In order to investigate the cause of the rhabdomyolysis, the protein electrophoresis was performed, and the EP pattern of serum CK isoenzyme shows MM fraction only (100%). In addition, tests were performed to discriminate the cause of rhabdomyolysis, we found that patients with severe hypothyroidism. Therefore we treated him antiplatelet therapy for ischemic stroke, levothyroxine therapy for hypothyroidism. After that creatine kinase decreased and right hemiplegia, dysarthria symptoms were improved. Author thinks hypothyroidism can cause rhabdomyolysis, which can occur acute kidney disease. As a treatment with taking levothyroxine, rhabdomyolysis and acute kidney disease can be improved through this case report.

Key Words: 뇌경색, 횡문근 용해증, 갑상선 기능저하증
Cerebral infarction, Rhabdomyolysis, Hypothyroidism