

## 조현병환자에서 다음증으로 발생한 저나트륨혈증에 의한 뇌교외 수초 용해증

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## Extrapontine Myelinolysis Caused by Hyponatremia after Polydipsia in Schizophrenia

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**Introduction:** Central pontine myelinolysis (CPM) and extrapontine myelinolysis (EPM), a neurologic disorders associated with damage to the myelin sheath of brain cells, is rare but can be irreversible. It is usually caused by alcoholics, malnourished individuals, chronic liver diseases, and rapid correction of hyponatremia. We report a case of EPM caused by acute hyponatremia which developed in a schizophrenic patient with polydipsia.

**Case:** A 61-year-old woman presented with stupor and dysarthria after slip down. She had a 10-year history of schizophrenia with mental retardation. A few days ago, she started having polydipsia. No alcoholism, malnutrition or other serious disease was identified. Her pupils were isocoric, barely reactive. The neurological examination revealed moderate quadriparesis with inability to speak and swallow. Laboratory tests revealed hyponatremia (119.9 mmol/l) and serum hypo-osmolality (256 mOsm/kg), which were associated with polydipsia. Other biochemical tests and computed tomography of the head showed no remarkable findings. Brain magnetic resonance imaging revealed hyper-intense lesions in deep and subcortical white matter of both cerebral hemispheres suggestive EPM. Although her mental status restored after supportive care and correction of hyponatremia, regardless, residual movement and speech deficits were present.

**Conclusion:** CPM and EPM, most often occurs during rapid correction in hyponatremia patients. But the possibility of EPM should also be considered when hyponatremia occurs in patients with schizophrenia as a result of polydipsia and water intoxication.

**Key Words:** 뇌교외 수초 용해증, 뇌교 수초 용해증, 저나트륨혈증

Extrapontine myelinolysis, Central pontine myelinolysis, Hyponatremia