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PARATHYROID STORM & TREATMENT OF HYPERCALCEMIA

Abstract

Parathyroid storm in patients with primary hyperparathyroidism has previously been described as hyperparathyroid crisis, parathyroid intoxication or acute hyperparathyroidism. Whatever the nomenclature, all emphasize the severity and urgency of this disease entity. The symptoms and signs of the syndrome are not only due to the hypercalcemia, but also to the toxic effects of the parathyroid hormone (PTH). The mortality rate in untreated cases of parathyroid storm is essentially 100%. With combined medical-surgical treatment, it is still reported to be as high as 40%. We presented the case of the patient with parathyroid storm, presented with severe hypercalcemia (5.5mmol/l) after recurrent pancreatitis and surgical exploration of the neck which was unable to identify the parathyroid adenoma. The serum level of PTH was greater than 1000pg/ml. Initially good responsiveness (Ca 3.5mmol/l) to a saline infusion, steroids, furosemide and bisphosphonate administration was noted. Unfortunately, patient died with the clinical presentation of respiratory distress syndrome (ARDS) and cardiac arrest.

Key words: parathyroid storm, hypercalcemia, bisphosphonates.