

- ✓ 1. A 47-year-old man with alcoholism is transferred from the hospital to a drug rehabilitation facility. On arrival, examination shows hyperreflexia and a tremor in both hands when they are outstretched. His serum calcium concentration is 8.1 mg/dL. Which of the following is the most likely additional serum electrolyte abnormality in this patient?

- ☐ A) Hypochloremia
- ☐ B) Hypokalemia
- ☒ C) Hypomagnesemia
- ☐ D) Hyponatremia
- ☐ E) Hypophosphatemia

Correct Answer: C. Patients with alcohol use disorder often develop multiple vitamin, mineral, and electrolyte deficiencies due to malnutrition from liver failure, vitamin and the concomitant diuretic effect of alcohol, leading to excessive urinary losses. This patient's examination demonstrates neurologic symptoms, including hyperreflexia and tremor in the setting of alcoholism. Magnesium deficiency is common in patients with alcoholism and often presents with hyperreflexia and tremor. Additional symptoms of magnesium deficiency can include seizures, muscle spasms, and dysrhythmias (eg, Torsades de Pointes). **Incorrect Answers: A, B, D, and E.** Hypochloremia (Choice A) infrequently occurs in isolation, and when present, is usually associated with imbalances in sodium, acid-base, or volume status. Most patients do not have symptoms of hypochloremia independent of the presenting condition, such as dehydration from diarrhea, vomiting, or central nervous system symptoms associated with concomitant hyponatremia. Hypokalemia (Choice B), while often occurring in alcoholism, presents commonly with cardiac conduction abnormalities, such as acquired long-QT syndrome or dysrhythmias, but does not typically present with peripheral neurologic deficits. Hyponatremia (Choice D) is often asymptomatic if chronic and slowly developing, although when acute, it is associated with central nervous system symptoms such as headache, nausea, vomiting, confusion, delirium, weakness, seizures, and coma. Hypophosphatemia (Choice E) can occur in the setting of nutritional deficiency, especially anorexia nervosa or bulimia. Symptoms result from depletion of adenosine triphosphate and include muscle weakness, cardiorespiratory depression, and neurologic depression such as seizure or coma.

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