**A rare case of Myxedema Coma precipitating**

**Acute Renal Failure**

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**ABSTRACT**

**Background**: Hypothyroidism, one of the most prevalent endocrine disorders worldwide has a wide range of clinical presentations, ranging from asymptomatic to myxedema coma. The term myxedema coma refers to a life- threatening form of a decompensated hypothyroid state, whose mortality is quite high from 25- 60%. This is a true medical emergency.

**Aim**: To evaluate for endocrinological emergencies like myxedema coma in acute renal failure

**Case Report**: A 70-year-old male, known hypothyroid on treatment and without history of any addiction, presented with complaints of decreased urine output since one month prior to admission. He had recent history of lacunar acute ischemic stroke (NIHSS score of ) 3 days prior to admission. His lab parameters showed AKI with hyperkalemia with metabolic acidosis. Patient was started on alternate day dialysis in view of no improvement in renal function. In hospital, patient started having fall in sensorium & put on ventilatory support due to poor GCS. Thyroid profile suggestive of severe hypothyroidism, possibility of myxedema coma was kept and started on treatment with hydrocortisone and levothyroxine. Patient showed signs of improvement and was extubated.

**Results**: This case adds evidence for endocrinological emergencies like myxedema coma causing acute renal failure requiring immediate attention and treatment.

**Conclusion**: We described a rare case of myxedema coma with atypical features associated with renal failure. Treatment should be started when a patient presents with coma and renal dysfunction with or without dialysis, even in the absence of hypotension, hypothermia, hyponatremia, and hypoxemia.