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# A rare case of Osmotic demyelination syndrome due to hypokalemia in a chronic alcoholic patient

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***Abstract**:*
*Osmotic demyelination syndrome also known as central pontine myelinolysis, is a rare disorder characterized by non-inflammatory demyelination in the central pons. Diagnosis of incipient central pontine myelinolysis was based on acute brain-stem dysfunction, serum electrolyte disturbances, malnutrition in combination with typical neuroradiological findings.*

***Keywords:*** *Demyelination, quadriparesis, conjugate palsy, Hypokalemia, alcoholism.*

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## I. Case:

A 30 – years old male with a history of significant alcohol intake, presented to casualty with weakness of all limbs, difficulty swallowing, speaking, decreased sensorium, confusion, letharzy. Physical examination, GCS (E3V2M4), quadriparesis, conjugate palsy, bilateral ptosis, absent deep tendon reflexes, and biochemically revealed hypokalemia and normal sodium levels, mildly deranged liver enzymes, radiologically MRI Brain showed trident shaped central pontine lesion, hyperintense on axial T2WI/FLAIR and hypointense in T1WI, and showed no blooming on SW Images, CSF findings were normal. A final diagnosis of Central Pontine Myelinolysis was made. Potassium corrections were done as per recommended guidelines. There was improvement in sensorium and improvement in power of all limbs, and patient was discharged for follow up.

## **References**:

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