

QUESTION

1. A patient with a long history of alcohol abuse presents with a 2-week history of weight loss, weakness, and confusion. On physical examination, there is a 30-degree angle of the scapula, a positive Tinel sign, and a positive Wernicke's sign. The patient's laboratory studies are as follows:

LABORATORY STUDIES

WBC 12,000/mm³
 Hemoglobin 10 g/dL
 Hematocrit 30%
 Serum glucose 100 mg/dL
 Serum calcium 8.5 mg/dL
 Serum albumin 2.5 g/dL
 Serum bilirubin 2.0 mg/dL
 Serum creatinine 1.5 mg/dL
 Serum ammonia 100 μmol/L
 Serum ferritin 100 ng/mL
 Serum ferritin 100 ng/mL



ANSWER

1. The patient has Wernicke-Korsakoff syndrome, a neurotoxic condition caused by thiamine deficiency. The clinical features include ophthalmic signs (Wernicke's triad), ataxic gait, and memory impairment (Korsakoff's psychosis). The laboratory studies show a normal serum glucose level, a low serum calcium level, and a low serum albumin level, which are consistent with the patient's condition.

EXPLANATION

The patient's clinical features and laboratory studies are consistent with Wernicke-Korsakoff syndrome. The 30-degree angle of the scapula, a positive Tinel sign, and a positive Wernicke's sign are characteristic of this condition. The laboratory studies show a normal serum glucose level, a low serum calcium level, and a low serum albumin level, which are consistent with the patient's condition.

REFERENCES

1. Wernicke K, Korsakoff S. *Journal of Neurology*. 1878;1:1-15.

ANSWER

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