

Case 7 (March 9 2006): N Engl J Med 2006;354:1065-72.

## Case 7-2006 — A 47-Year-Old Man with Altered Mental Status and Acute Renal Failure

**Demographic:** Male, 47 years, America North, General speciality

# Clinical features extracted from the case and entered into the query box:

obtunded
hyperchloremic acidosis and anion-gap metabolic acidosis
calcium oxalate crystalluria
generalized tonic-clonic seizure
vomiting
bilateral rhonchi
small left perihilar opacity
hyperglycemia
high creatinine

## Synonyms used by Isabel (optional) for the above query:

high creatinine hyperglycemia vomiting

### STOP!

## Before you read further you might want to construct your own:

- Complete differential diagnosis
- Final diagnosis

## In the following section you will find:

- The differential diagnosis constructed by the MGH panel
- The final diagnosis of the case
- Which of the MGH panel differential diagnoses did Isabel contain
- Did Isabel suggest the Final diagnosis



## Differential Diagnoses considered by the MGH panel:

## Four Main Causes of Anion-Gap Metabolic Acidosis.

#### Lactate

- -Carbon monoxide
- -Cyanide
- -Isoniazid (>30 mg/kg)
- -Iron
- -Salicylates (cytochrome poisoning)
- -Metformin
- -Acute alcohol intoxication

#### Ketoacidosis

- -Diabetic ketoacidosis
- -Alcoholic ketoacidosis

#### Renal failure

- -Uremia, decreased secretion of ammonium, hydrogen sulfate, hydrogen phosphate
- -Toxins and metabolites
- -Toluene
- -Methanol, ethylene glycol, paraldehyde (metabolized to formate, oxalate, acetate)

## Final Diagnosis of the case according to NEJM:

Ethylene glycol intoxication

## Differential Diagnoses of the case as given by Isabel:

Ethylene glycol intoxication – Isabel 1<sup>st</sup> page Diabetic Ketoacidosis – Isabel 1<sup>st</sup> page Renal Tubular acidosis – Isabel 1<sup>st</sup> page Alcohol toxicity – Isabel 1<sup>st</sup> page

Salicylate toxicity – Isabel 1st page

Methanol toxicity – Isabel 1st page

Isoniazid toxicity – Isabel 2<sup>nd</sup> page & on clicking on speciality heading

## Was the final diagnosis given by Isabel?

Yes, Ethylene glycol intoxication (Isabel 1<sup>st</sup> page).

## Entire presentation cut and pasted into the Isabel query box:

None of the above



## Isabel Differential:

NEPHROLOGY	TOXICOLOGY	
Distal Renal Tubular Acidosis Type 1 Proximal Renal Tubular Acidosis Type 2 Arteriolar Nephrosclerosis Cystinosis	Ethylene Glycol Toxicity  Alcohol Toxicity  Salicylates Toxicity  Methanol Toxicity	
Idiopathic Hypercalcuria HyperK RTA Type 4 Chronic Renal Failure	NSAID's Toxicity  Calcium Antagonists Toxicity  Isoniazid Toxicity	
Medullary Cystic Disease  Diabetic Nephropathy	ENDOCRINE SYSTEM HHNC / HONK	
GASTROINTESTINAL DISORDERS  Cholestasis Associated with Parenteral Nutrition	Diabetic Ketoacidosis  MEN Type 1	
MERVOUS SYSTEM DISORDERS  Generalized Tonic-Clonic Seizures	INFECTIOUS DISEASES	
Status Epilepticus ORTHOPEDIC DISORDERS	RESPIRATORY SYSTEM DISORDERS ARDS	
Renal Osteodystrophy	Pneumocystis Pneumonia	
PSYCHOLOGIC DISORDERS	METABOLIC DISEASES	
Bulimia Nervosa	Type I Glycogen Storage Disease  → Galactose Metabolism Defects  → Carnitine Cycle Defects	