

## TWO ENDOCRINOLOGICAL DISORDERS WITH ONE PSYCHIATRIC AGENT

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Intensive laboratory work-up in any patient visiting outpatient department of internal medicine may be essential so as to contribute to his or her well-being. Below a 41 year-old woman will be presented because of complains of over-urination and polydipsia. She was not receiving any anti-diabetic medication and having no relatives with this condition. Her past medical history revealed bipolar disorder for about 12 years which was being managed via lithium as a dose of 2x300 mg. Her physical examination demonstrated goitre which was confirmed by ultrasonography. There was 2x2 cm nodule formation on the left side of the gland. Other systems were within normal limits. After ruling-out psychogenic polydipsia soon after consultation with psychiatric department as she would need advanced care for her new endocrine disorder added to her former bipolar disease. 24-hr urine collection was planned with careful observation. She was diagnosed as autoimmune hypothyroidism which was evident by high titers of anti-thyroid peroxidase antibody associated with low free thyroid homons and extremely high TSH level (15-fold higher than upper limit of normal values). Second endocrinological abnormality was diabetes insipidus with low urine osmolality, low urine density and high normal (upper-limit of normal) serum osmolality owing to dilution of the serum with the contribution of hypothyroidism.

Lithium has been established as a useful drug for the treatment of bipolar disorder (1). But it has been shown to give rise to some side effects over endocrine functions such as hyperparathyroidism, hypothyroidism, thyrotoxicosis, weight gain, and renal toxicity, which may present as nephrogenous diabetes insipidus (2,3). In conclusion, we suggest taking into consideration of above mentioned problems during long-term lithium treatment, frequent consultations between these two disciplines as internal medicine and psychiatry may help realize earlier for diagnosis and future follow-up program

### REFERENCES

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