



HOLY C.O.W.!

IT'S...

Clinical Question of the Week #15
October 6th, 2008 through October 13th,
2008

Please e-mail your answers to Kuo, Tim, Wendy, and Kevin (klian@mednet.ucla.edu; tprovias@mednet.ucla.edu; wsimon@mednet.ucla.edu; kbreger@mednet.ucla.edu) by 0800 on Monday, October 13th, 2008. The resident or intern with the most correct answers at the end of each month will receive a prize!

Case: A 36-year-old man is transferred from another medical center for evaluation of chronic abdominal pain and failure to thrive. Over the past several months, the patient has had progressively increasing fatigue, malaise, decreased appetite, and generalized weakness. He has also had intermittent abdominal pain associated with nausea and occasionally vomiting. He has lost 15lbs over the past six months unintentionally. His other symptoms include depression over the past year. He was noted at the other medical facility to have somewhat low blood pressures and on occasion was found to be orthostatic, which was attributed to poor oral hydration. Laboratory data accompanying the patient is notable for electrolytes as follows: Na 129, K 5.3, Cl 106, bicarbonate 16, BUN 10, Cr 0.8, glucose 97. A skull film also accompanies the patient, which is shown below. Physical examination is notable for mild hypotension, tan skin (from living in Oxnard, per the patient), and flat affect.



Questions:

1. **What is the diagnosis?**
2. **Who described this condition, and what was the most prevalent cause of this condition at the time? What is it now?**
3. **What is the finding shown in the image?**
4. **How is the diagnosis made?**