

Neuroleptic Malignant Syndrome: A Report of Two Cases

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Neuroleptic malignant syndrome (NMS) is an acute, uncommon but life-threatening disease. We require more awareness of this disease, earlier diagnosis and more aggressive treatment can avoid mortality and decrease complications. This study, we report two cases of neuroleptic malignant syndrome, the first one admitted to nephrology ward for further treatment, the other was discharged from emergency department after adequate treatment. This study reminds us that if we can earlier diagnosis and more aggressive treatment of neuroleptic malignant syndrome, the hospitalization and complications will be reduced.

Key words: neuroleptic malignant syndrome (NMS), life-threatening disease

Introduction

Neuroleptic malignant syndrome (NMS) is a serious and rare neurologic emergency due to the complications of use neuroleptic agents. The clinical syndrome are most include (1) hyperthermia; (2) extreme generalized rigidity; (3) autonomic instability; (4) altered mental status.⁽¹⁻³⁾ It's mortality often results from the dysautonomic disorders and systemic complications⁽⁴⁾. However, earlier diagnosis and early accept treatment is able to prevent the mortality and complications. Here, we describe two patients with neuroleptic malignant syndrome, the first one was a case of schizophrenia with consciousness change and generalized rigidity admitted to our ED, the other was diagnosed of bipolar disorder for 7-8 years, he came to ED due to muscle rigidity, palpitation and slurred speech.

Case Report

A 38-years-old man had medical history of schizophrenia, paranoid type which was diagnosed at 18 years old, he admitted to Kaohsiung Kai-Suan Psychiatric Hospital for 4-5 months ago due to queer behavior. Acute onset of consciousness change and generalized rigidity was noted during hospitalization, he was sent to Kaohsiung 802 Hospital emergency department, where hyponatremia (Na=119 mmol/L), leukocytosis (WBC=14610/uL) and CPK=213 IU/L were noted, then he was transferred to our emergency department for further management.

In our emergency department, the initial vital signs were blood pressure: 120/90 mmHg, pulse rate: 95/min, respiration rate approximately: 16 breaths/min, body temperature: 36.5°C, the consciousness level was E3V2M5. Physical

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