

Pseudohypoparathyroidism

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Sir,

The recent report on pseudohypoparathyroidism is very interesting [1]. Dosi et al., reported "a case of a young male who had symptoms of chronic hypocalcaemia, with a positive Trousseau's and Chvostek's sign on examination, without any features of Albright's hereditary osteodystrophy [1]." In fact, this is an uncommon disease that is difficult to diagnose. The treatment is usually a combined "calcium therapy and vitamin D supplementation [2]." Here, the author would like to discuss an experience on management of similar cases. The indexed patient had the same clinical feature and successful similar treatment could be derived. However, there was an interesting problem in long term management. This patient changed the following up visit from one hospital to another hospital and the

problem was the cessation of calcium supplementation by the new physician in charge who did not know and concerned on the problem and the patient developed the clinical sign and symptom again (in our setting, the calcium is not listed in national essential drug list and cannot be covered by universal coverage right). Since this disorder requires long life medication, it is necessary to educate the patient on the knowledge about the disorder and the necessity of calcium and vitamin D supplementation.

REFERENCES

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