

## **Abstract**

**Introduction** Hypocalcaemia characteristically causes symptoms of neuromuscular hyper-excitability. When severe, laryngospasms, encephalopathy and seizures may occur. We report a patient with hypoparathyroidism presenting with a subacute encephalopathy and rapid deterioration of consciousness. Diagnostic process and treatment approach is discussed.

**Case presentation** A middle aged female with multiple comorbidities and a recent history of malaise and forgetfulness was brought in semiconscious state with a GCS of 10 out of 15 without focal neurological deficits except bilateral extensor plantar reflexes. She had no clinical features of sepsis of nervous system or elsewhere. Investigations revealed basal ganglia calcifications, prolonged QT interval and severe hypocalcaemia with hyperphosphataemia and low parathormone levels. She was successfully treated with parental calcium followed by long term calcium and vitamin D supplements which lead to complete resolution of symptoms.

**Conclusions** Hypocalcaemia is an easily treatable cause for encephalopathy and seizures that require systematic evaluation and treatment. Hypoparathyroidism requires lifelong calcium and vitamin D replacement with close monitoring for complications of hypercalciuria due to over-replacement.