

## **Abstract**

### **Background**

Primary hyperparathyroidism is the commonest cause for hypercalcemia worldwide. Patients can present with diverse manifestations involving many organ systems. The diagnosis is confirmed by the presence of elevated or high normal serum intact parathormone levels in the presence of hypercalcemia. Underlying cause could be an adenoma, hyperplasia or rarely carcinoma. We present a patient who presented with psychiatric manifestations and was found to have severe hypercalcemia.

### **Case Presentation**

A middle aged female patient presented with altered behavior. She was found to have severe hypercalcemia with marked elevation of parathormone level. Initial imaging revealed a single enlarged gland. The gland was resected with minimal invasive surgery. Immediately following the surgery parathormone levels normalized. As the histological examination revealed some atypical features, a second surgery with right hemithyroidectomy was performed successfully.

### **Conclusion**

Severe hypercalcemia can sometimes manifest with neurocognitive symptoms alone. Parathyroid carcinoma should be suspected in patients with severe hypercalcemia and markedly elevated parathormone levels.