

ABSTRACT

Hypokalemic periodic paralysis is a rare clinical syndrome characterized by low serum potassium and severe muscle weakness which is easily treatable. The etiology can be attributed either primary idiopathic or secondary to other disorders such as thyroid dysfunction and renal tubular acidosis. Prompt replenishment and maintenance of serum potassium and identifying the cause is paramount important in management. Further management is adjusted according to the cause of hypokalemia, severity of illness and frequency of attacks.