

Electrolyte issues with chronic alcohol use span social spectrum

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(HealthDay)—Electrolyte disturbances and acid-base disorders are

common occurrences in patients with chronic alcohol-use disorder regardless of social circumstances, according to a review published online Oct. 4 in the *New England Journal of Medicine*.

Biff F. Palmer, M.D., from the University of Texas Southwestern Medical Center in Dallas, and Deborah J. Clegg, Ph.D., from Cedars-Sinai Medical Center in Los Angeles, conducted a review of the pathophysiological causes and treatment of alcohol-related electrolyte [disorders](#).

The authors write that while metabolic acidosis and hyponatremia are often present on admission, other plasma concentrations may not be apparent initially. However, after the initiation of treatment for acidosis and to restore extracellular fluid volume, potentially life-threatening deficits may appear. In the first 24 to 36 hours after admission, telltale signs of chronic alcohol ingestion are precipitous decreases in plasma concentrations of phosphate, magnesium, potassium, and calcium. An array of both acid-base disorders and electrolyte disorders can occur regardless of social status—not only in malnourished [patients](#) with intercurrent illness but also in well-nourished patients who abuse alcohol.

"Electrolyte disturbances that are present may be corrected initially, but owing to the deleterious effects of alcohol on renal tubular function, they may reappear within days after the initial correction. Understanding the pathophysiological features of [electrolyte](#) disorders related to [alcohol](#) abuse should help physicians to implement appropriate therapies and avoid the potential toxic effects of these abnormalities in their patients," conclude the authors.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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