BACKGROUND:

Immobilisation hypercalcaemia is serious complication of prolonged immobility of any cause such as spinal cord injury, polio victims, burns victims, in weightlessness (astronauts) as well as trauma patients. We present a case of young patient with hypercalcaemia due prolonged immobility following road traffic accident.

CASE REPORT:

18 years old student was admitted to the hospital (trauma CENTRE) following road traffic accident (motor bike). He sustained multiple fractures, skull, spine (T7-L5), chest and pelvis. He also sustained abdomen and pelvic haematoma. At scene of crash he had GCS 5/15, needing intubation and Airlifted to trauma centre, where he underwent extensive surgery laparotomy and pre-peritoneal packing, reduction of fracture dislocation of ankle, open reduction and fixation of bilateral pelvises fracture and acetabulum. His past medical includes orchidectomy after failed orchidopexy, and epistaxis. After pelvis fracture and acetabulum. His past medical includes polio victims, burns victims, in weightlessness (astronauts) as well as trauma patients. We present a case of young patient with hypercalcaemia due prolonged immobility following road traffic accident.

The patient is undergoing physiotherapy, with improving mobility. He was treated with intravenous fluids and pamidronate 30mg single dose and his calcium level normalised. His calcium remains normal and the patient is undergoing physiotherapy, with improving mobility.

He was transferred to his local Hospital for rehabilitation. His bloods showed Na+ 143mmol, K 3.3mmol, creatinine 45µmol/L, calcium 2.25mmol/L, AST 95U/L, ALP 45U/L, Hb 12g/L. He had normal calcium (2.25mmol/L) during his initial admission to the trauma centre.

His calcium remains normal and the patient is undergoing physiotherapy, with improving mobility.