Suxamethonium chloride

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Malignant hyperthermia: case report

A 56-year-old man experienced malignant hyperthermia after receiving suxamethonium chloride [succinylcholine chloride].

The man presented to an Emergency Department with seizure-like activity; investigations confirmed intracerebral haemorrhage related to a hypertensive crisis. After an acute change in his mental status, suxamethonium chloride [*dosage and route not stated*] and propofol were administered and he was intubated while an external ventricular device was placed under anaesthesia. The next day he was again anaesthetised and sedated prior to surgery for haematoma evacuation. His condition improved and he was extubated. However, after several days, his condition deteriorated and he required reintubation with suxamethonium chloride [*dosage and route not stated*] and propofol. He demonstrated decerebrate posturing 3 hours later and electroencephalography showed diffused encephalopathy. While in an ICU, it was noted that he showed bilateral extension with diffuse muscle rigidity and stimulation. His core body temperature was 40°C and he was tachycardic, in a state of respiratory and metabolic acidosis; malignant hyperthermia was considered.

The man received dantrolene, and his condition improved. He was extubated after 3 days, without neurological deficits.

Author comment: "*[T]he ICU team determined this patient had experienced a delayed onset of [malignant hyperthermia]. . . exposure to [suxamethonium chloride], used to assist in endotracheal tube insertion, seemed to be the trigger.*"

Twine N. Delayed onset of malignant hyperthermia in the intensive care unit: A rare but life-threatening disorder. Critical Care Nursing Quarterly 36: 213-217, No. 2, Jun 2013. Available from: URL: http://dx.doi.org/10.1097/CNQ.0b013e31828412fc - USA

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