



“This case report provides a recent example of the potential danger of rationing parenteral multivitamins in chronically parenteral nutrition (PN)-dependent patients in the setting of national supply shortages.” Da Silva et al (2014).

Reference:

Da Silva, Y.S., Horvat, C.M and Dezfulian, C. (2014) Thiamine Deficiency as a Cause of Persistent Hyperlactatemia in a Parenteral Nutrition-Dependent Patient. JPEN. August 5th. .

Thiamine deficiency as a cause of hyperlactatemia in parenteral nutrition patients

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Abstract:

Background: Despite the demonstrated dangers of inadequate supplies of injectable multivitamins, periodic shortages of these crucial pharmaceuticals continue to occur in the developed world. This case report provides a recent example of the potential danger of rationing parenteral multivitamins in chronically parenteral nutrition (PN)-dependent patients in the setting of national supply shortages.

Method and Results: Case report describing a chronically PN-dependent 21-year-old man who presented with signs and symptoms of septic shock to a pediatric intensive care unit at a



university hospital. The patient demonstrated hyperlactatemia that persisted following hemodynamic stabilization, and he was determined to be severely deficient in thiamine despite thrice-weekly home multivitamin infusions, instead of daily due to national supply shortages. The patient's hyperlactatemia rapidly resolved following thiamine supplementation.

Conclusion: Physicians must be vigilant for potentially life-threatening nutrition deficiencies, as illustrated in this case of thiamine insufficiency, in PN-dependent children and adults in the setting of nationwide limitations in multivitamin supply.

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