At the out-patient clinic she gave a three month history of paraesthesiae in the hands, the right worse than the left, which woke her at night and were relieved by hanging her arms over the edge of the bed. There were no other symptoms of thyroid disorder. On physical examination pinprick and light touch were reduced over the median nerve distribution. There was a slight delay in ankle jerk relaxation and a smooth thyroid was easily palpable. Laboratory tests of thyroid function (which had been normal eighteen months previously) revealed total T4–12 nmol/L (NR 50–150), free T4–1 pmol/L (NR 10–28), TSH < 50 mU/1 (NR 0–7 mU/1). Thyroid antibody screen was negative. Thyroxine replacement was instituted (100 ug daily) and after two to three months of treatment the symptoms of carpal tunnel syndrome resolved completely. Lithium was continued throughout.

Carpal tunnel syndrome may result from lithium therapy because of fluid retention caused by the drug. In this woman's case, however, the primary cause must have been hypothyroidism because the symptoms resolved with thyroxine while lithium was continued. Several points are raised by this case. First, lithium induced hypothyroidism may present in unusual ways without typical symptoms such as lethargy, weight gain, voice change and cold intolerance. Secondly, hypothyroidism may present late – in this instance after 10 years therapy during which thyroid function had been normal on several occasions. Thirdly, the need for regular monitoring of thyroid function in patients taking lithium is clear (although a symptomatic presentation may still occur).

KENNETH A. WOOD
ROBIN J. JACOBY

The Bethlem Royal Hospital,
Monks Orchard Road,
Beckenham BR3 3BX

A HUNDRED YEARS AGO

Asylum Reports

"If such is the case, and we are bound to believe the statement, we do not hesitate to say that Holloway's is a great Charity wasted, for Mr Holloway's original intention or plan was to provide for private patients just above the pauper class – *none* over 21s. a week. *Now* the class he intended to benefit is expressly excluded. Endless structural alterations are or have been required, and a great charity is nullified. 'But yet the pity of it, Iago!' What unspeakable good *might* have been done with that money on the lines of the first intention! We are almost tempted to say that the taste of the pill though silvered is scarcely disguised, and that there are not a few 'dead flies which cause the ointment of the worthy donor to send forth a stinking savour'. We do not refer to the imperfect drainage only."

Reference

Journal of Mental Science (1887) **33**, 319.

Researched by Henry Rollin, Emeritus Consultant Psychiatrist, Horton Hospital, Surrey.

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