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| **Case** |
| A 70-year-old man visits the emergency department because of increasing confusion. His daughter says that the confusion started yesterday. Two days ago, the general practitioner prescribed a new drug for ‘his blood pressure, or was it for his incontinence?’. The daughter does not remember it. |
| **Physical examination** |
| Vital parameters: Blood pressure: 145/85 mmHg, pulse rate 88/min., respiratory rate 18/min., temperature 37,0 degrees Celsius.Abdomen: auscultation: gurgling bowel sounds, a dull to percussion mass suprapubic, palpation: hard and painful palpable bladder.*No abnormal findings were found by further physical examination.* |
| **Medical history** |
| Since 15 years: Essential HypertensionSince 10 years: Hypercholesterolemia Since 6 years: Atrial fibrillationSince 6 months: Urinary incontinence |
| **Medication** |
| Acenocoumarol 1 mg tablet, dosage scheme (or warfarin 1 mg, tablet, dosage scheme)Metoprolol 100 mg tablet with extended release, once a daySimvastatin 40 mg tablet, once a day1 unknown medication |
| **Laboratory results** |
| Serum creatinine 110 µmol /L or 1.24 mg/dL (references 62-115 mmol/L or 0.7-103 mg/dL) eGFR 64 mL/min/1.73m2 (>60)*No other abnormalities were found* |
| **Additional tests** |
| Ultra sound of abdomen: Urinary retention bladder (510 ml) |
| **Question** |
| Which of the following drugs is MOST likely the cause of his complaints? |
| **Options** |
| AmlodipineLisinoprilOxybutyninTamsulosin |
| **Answer** |
| Oxybutynin |

