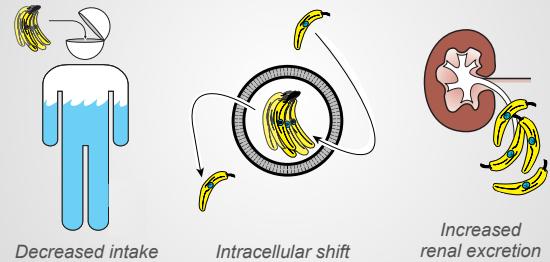




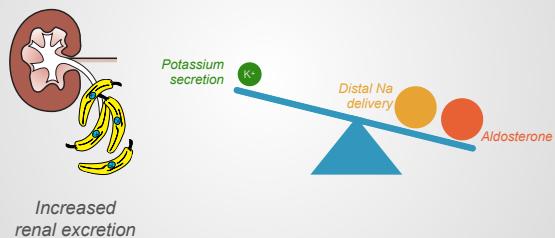
## Hypokalemia

Increased renal losses:  
Secondary hyperaldosteronism

### Three processes of hypokalemia



### Increased renal excretion



## Increased renal excretion

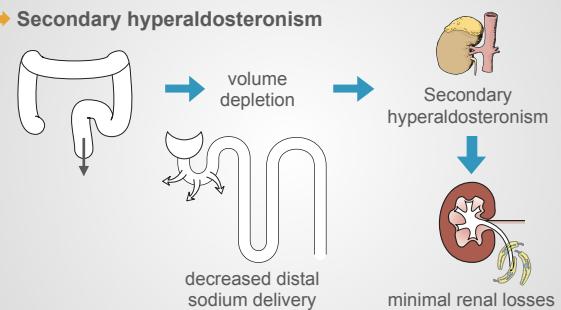
Secondary hyperaldosteronism	Diuretics Salt wasting nephropathies Vomiting
Primary hyperaldosteronism	Actual Apparent
Unreabsorbable anions	Proximal RTA Drugs
Potassium wasting nephropathy	Polyuria Distal RTA Hypomagnesemia

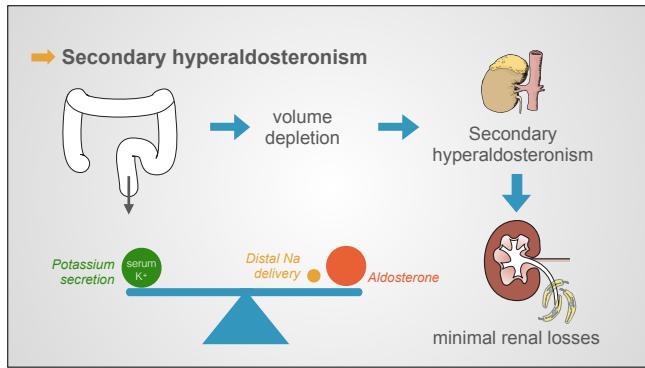
## Increased renal excretion

► Secondary hyperaldosteronism

Secondary hyperaldosteronism	Diuretics Salt wasting nephropathies Vomiting
Primary hyperaldosteronism	Actual Apparent
Unreabsorbable anions	Proximal RTA Drugs
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► Secondary hyperaldosteronism





### Increased renal excretion

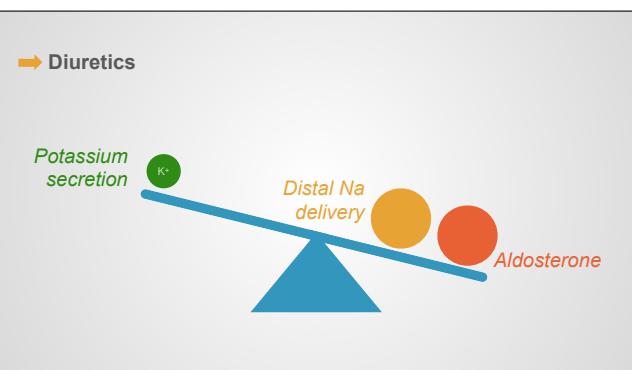
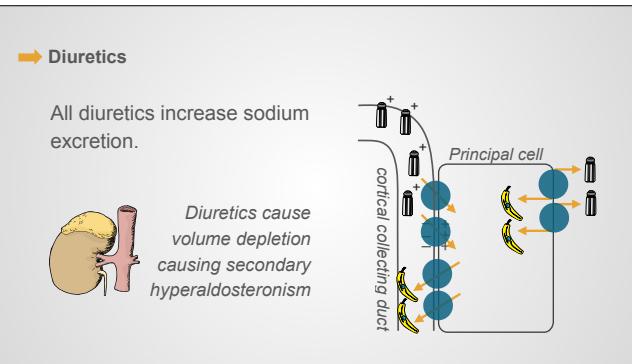
► Secondary hyperaldosteronism      Diuretics  
with increased sodium delivery!      Salt wasting nephropathies  
Vomiting

Primary hyperaldosteronism	Actual Apparent
Unreabsorbable anions	Proximal RTA Drugs
Potassium wasting nephropathy	Polyuria Distal RTA Hypomagnesemia

### Increased renal excretion

Secondary hyperaldosteronism ► Diuretics  
Salt wasting nephropathies  
Vomiting

Primary hyperaldosteronism	Actual Apparent
Unreabsorbable anions	Proximal RTA Drugs
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Increased renal excretion	
Secondary hyperaldosteronism	Diuretics ► Salt wasting nephropathies Vomiting
Primary hyperaldosteronism	Actual Apparent
Unreabsorbable anions	Proximal RTA Drugs
Potassium wasting nephropathy	Polyuria Distal RTA Hypomagnesemia

► Salt wasting nephropathies

Bartter syndrome is a genetic abnormality in the thick ascending loop of Henle.

Congenital loop diuretics

Gitelman syndrome is a genetic abnormality in the distal convoluted tubule.

Congenital thiazide diuretics

► Salt wasting nephropathies

Bartter's Syndrome =



Gitelman's Syndrome =



► Diuretics

Potassium secretion  
 $K^+$

