**Table 1. Articles describing hypokalemia with an electrocardiographic pattern of occlusion of the left main coronary artery. Abbreviations: STS = ST segment.**

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| **Characteristic** | **Own clinical case** | **Burgos et al.** 3 |
| * Age (years) | 84 | 42 |
| * Sex | Female | Female |
| * Medical history | Cholecystitis, diarrhea and arterial hypertension | Gestational hypertension and acute gastroenteritis |
| * Clinical presentation | Syncope | Palpitations and autonomic symptoms |
| * Initial electrocardiographic findings | Typical Atrial Flutter with rapid ventricular response.    Ascent of 0.1 mV del SST in aVR,  decrease in SST and inversion of the T wave in Dl, lower derivatives from V2 to V5. | Sinus tachycardia  Increased SST in aVR and V1 and decreased SST in the rest of the leads. |
| * Myocardial injury at admission | Acute myocardial injury | Without myocardial injury |
| * Resolution of electrocardiographic alterations by resolving hypokalemia | Yes | Yes |
| * Echocardiographic findings | Preserved biventricular function, with a 61% left ventricular ejection fraction (LVEF), and no valvular heart disease, contractility issues, or any pertinent findings. | Preserved biventricular function, without valvular heart disease, contractility issues, or any pertinent findings. |