

Age	Elderly
Environmental	High ambient temperature and humidity Heat waves Poor ventilation
Behavioural	Lack of acclimatization Salt and water deprivation Obesity
Underlying conditions	Infection/fever Diabetes Malnutrition Alcoholism Hyperthyroidism Impaired sweat production Healed burns Ectodermal dysplasia Impaired sweating Cardiovascular disease Fatigue
Drugs	Potassium deficiency Anticholinergics Antiparkinsonians Antihistamines Butyrophenones Phenothiazines Tricyclics Diuretics Sympathomimetics

factors predisposing to heatstroke

hyperthermia

causes of hyperthermia

Disorders of excessive heat production	Exertional hyperthermia Heat stroke (exertional) Malignant hyperthermia Neuroleptic malignant syndrome Lethal catatonia Thyrotoxicosis Pheochromocytoma Salicylate intoxication Sympathomimetic drug abuse Delirium tremens Seizures Tetanus
Disorders of diminished heat dissipation	Heat stroke (classic) Dehydration Autonomic dysfunction Anticholinergic poisoning Neuroleptic malignant syndrome
Disorders of hypothalamic function	Cerebrovascular accidents Encephalitis Trauma Granulomatous diseases Neuroleptic malignant syndrome

	Classic heat stroke	Exertional heat stroke
Arterial gases	Mixed respiratory alkalosis	Severe metabolic acidosis
Serum electrolytes	Na ⁺ , Mg ⁺ , Ca ²⁺ , Mg ²⁺ are usually normal	Hyperkalaemia Hypocalcaemia Hyperphosphataemia
Blood glucose	Hypophosphataemia Hyperglycaemia	Hypoglycaemia
Creatinine kinase	Moderately increased	Markedly increased
Hepatic enzymes	Markedly increased	Moderately increased
Acute phase proteins	Markedly increased	Moderately increased

classic vs exertional heatstroke