# Summary

A case of Gitelman’s syndrome with severe hypokalemia and pseudoischemic ECG changes is presented. A brief review on this kind of primary tubulopathy is also given. Clinical significance of possible difficulties for cardi-ologist is indicated (pseudoischemic ECG changes, QT-interval prolongation with life-threatening ventricular ar-rhythmias, risk of myopathy and rabdomyolisis development after statin administration, hypokalemia worsening due to prescribing diuretics).

**Key words**

Gitelman syndrome, hypokalemia, tubulopathy.