

## Considerations

### **Alcoholics Highest Risk**

#### **Alcoholic-martini with Up-arrow Risk**

Alcoholics have the highest risk of developing thiamine deficiency. They may develop Wernicke-Korsakoff syndrome and experience neurologic and psychologic symptoms. Since thiamine deficiency may cause irreversible brain damage, parenteral thiamine should be administered immediately in patients suspected to have Wernicke-Korsakoff syndrome.

### **Give Before Glucose**

#### **Before Glue-bottle**

Alcoholics are often malnourished and experience insulin dysfunction. Glucose is a carbohydrate commonly given to malnourished alcoholic patients. Since thiamine is required for carbohydrate metabolism, supplementation should be given prior to glucose administration.

### **Give IM or IV**

#### **Given In-muscle by IV-stand**

Supplemental thiamine is administered via intramuscular injection or intravenous line. Patients with severe thiamine deficiencies, such as beriberi or Wernicke-Korsakoff syndrome are given parenteral administration of thiamine.

### **Enriched Whole Grains**

#### **Rich Grains**

Enriched whole grains provide a good source of thiamine. Since most whole-grains in industrialized countries are fortified with thiamine, foods such as breads and cereals are a good dietary source of thiamine.

### **Pork**

#### **Pig**

Pork is the highest source of natural dietary thiamine.