

QUESTION
 A 65-year-old male patient with a long history of hypertension and hyperlipidemia presents to the clinic with a 2-week history of increasing fatigue, weight loss, and intermittent fevers. He reports that he has been unable to complete his usual activities of daily living. He has no chest pain, shortness of breath, or changes in bowel habits. He has been taking lisinopril and atorvastatin for several years. His last physical examination was 6 months ago, when he was noted to have a normal physical examination. He has no known allergies and is currently on no other medications.

ANSWER
 The patient's symptoms are concerning for a systemic illness, such as a malignancy or an infection. The most common cause of weight loss and fatigue in a patient with a long history of hypertension and hyperlipidemia is a malignancy. The most common sites for primary or metastatic disease are the lung, prostate, and colon. The patient's symptoms are also consistent with a chronic infection, such as tuberculosis or a fungal infection. The patient's symptoms are not consistent with a primary endocrine disorder, such as hyperthyroidism or diabetes mellitus.

KEY POINTS

The patient's symptoms are concerning for a systemic illness, such as a malignancy or an infection. The most common cause of weight loss and fatigue in a patient with a long history of hypertension and hyperlipidemia is a malignancy. The most common sites for primary or metastatic disease are the lung, prostate, and colon. The patient's symptoms are also consistent with a chronic infection, such as tuberculosis or a fungal infection. The patient's symptoms are not consistent with a primary endocrine disorder, such as hyperthyroidism or diabetes mellitus.