

# CHARACTERISTICS AND MANAGEMENT OF PATIENTS HOSPITALIZED WITH HYPONATREMIA IN ENDOCRINOLOGY

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## OBJECTIVES

The objective of the study was to analyze the characteristics and management of patients hospitalized with hyponatremia in Endocrinology.

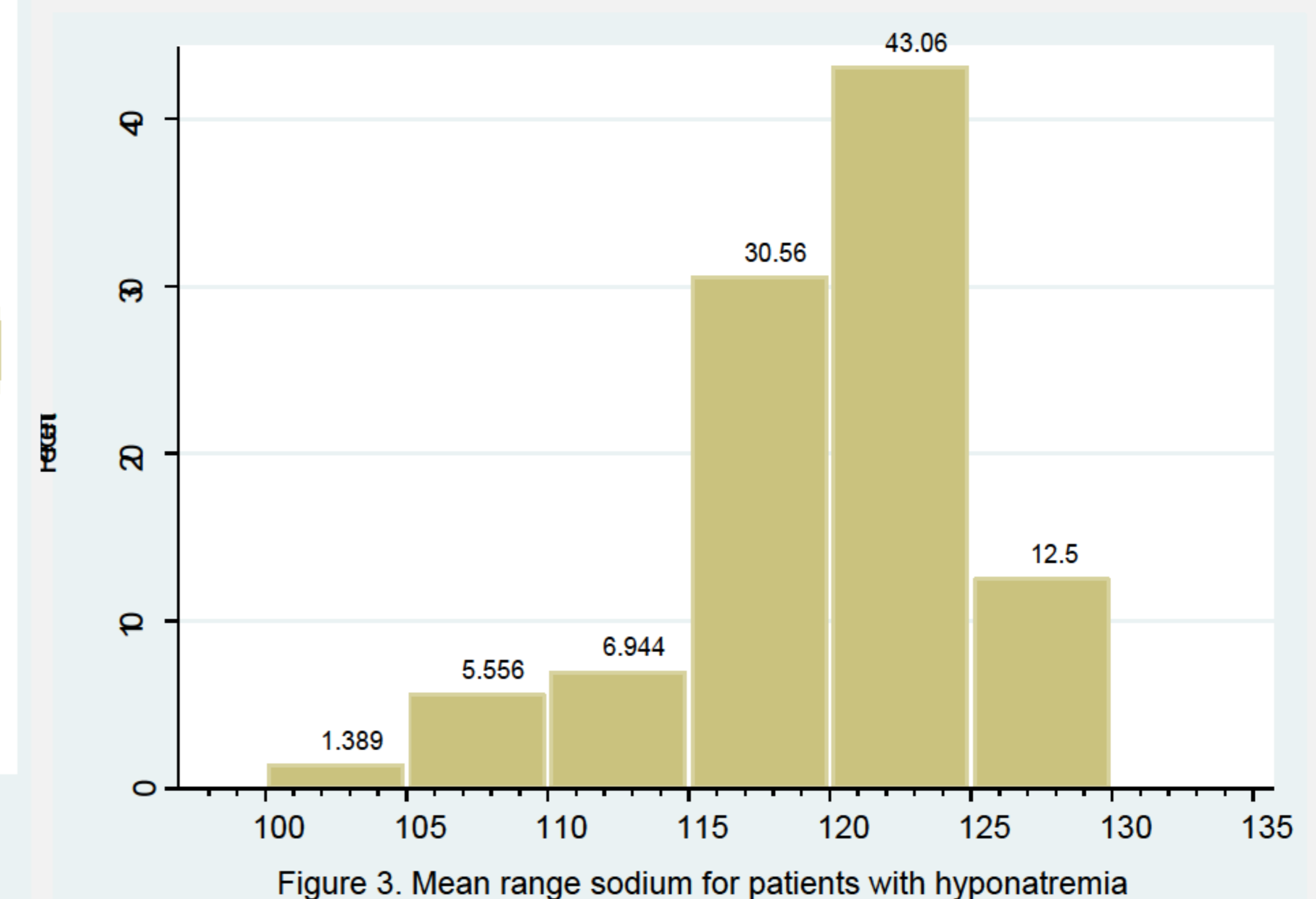
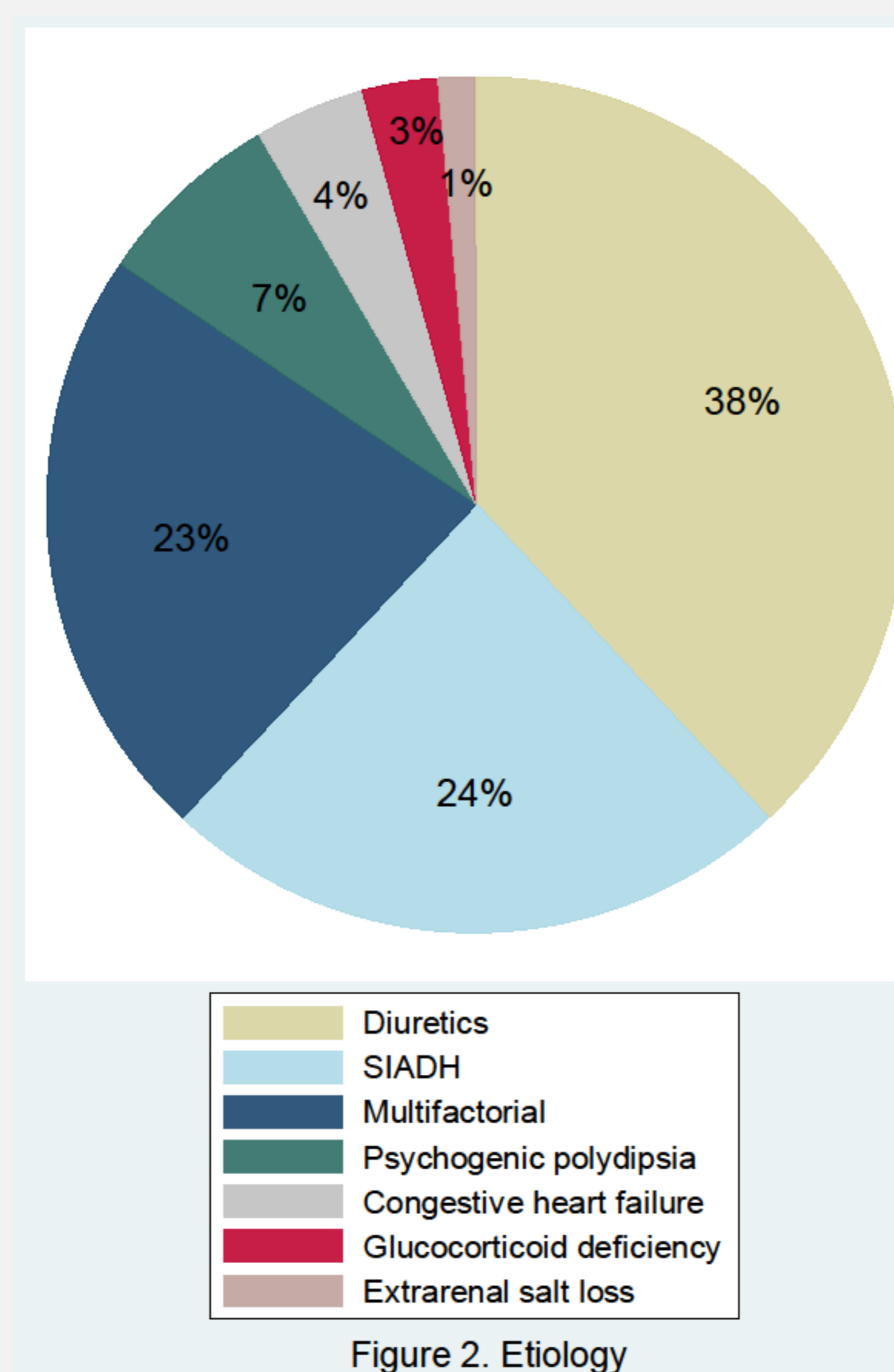
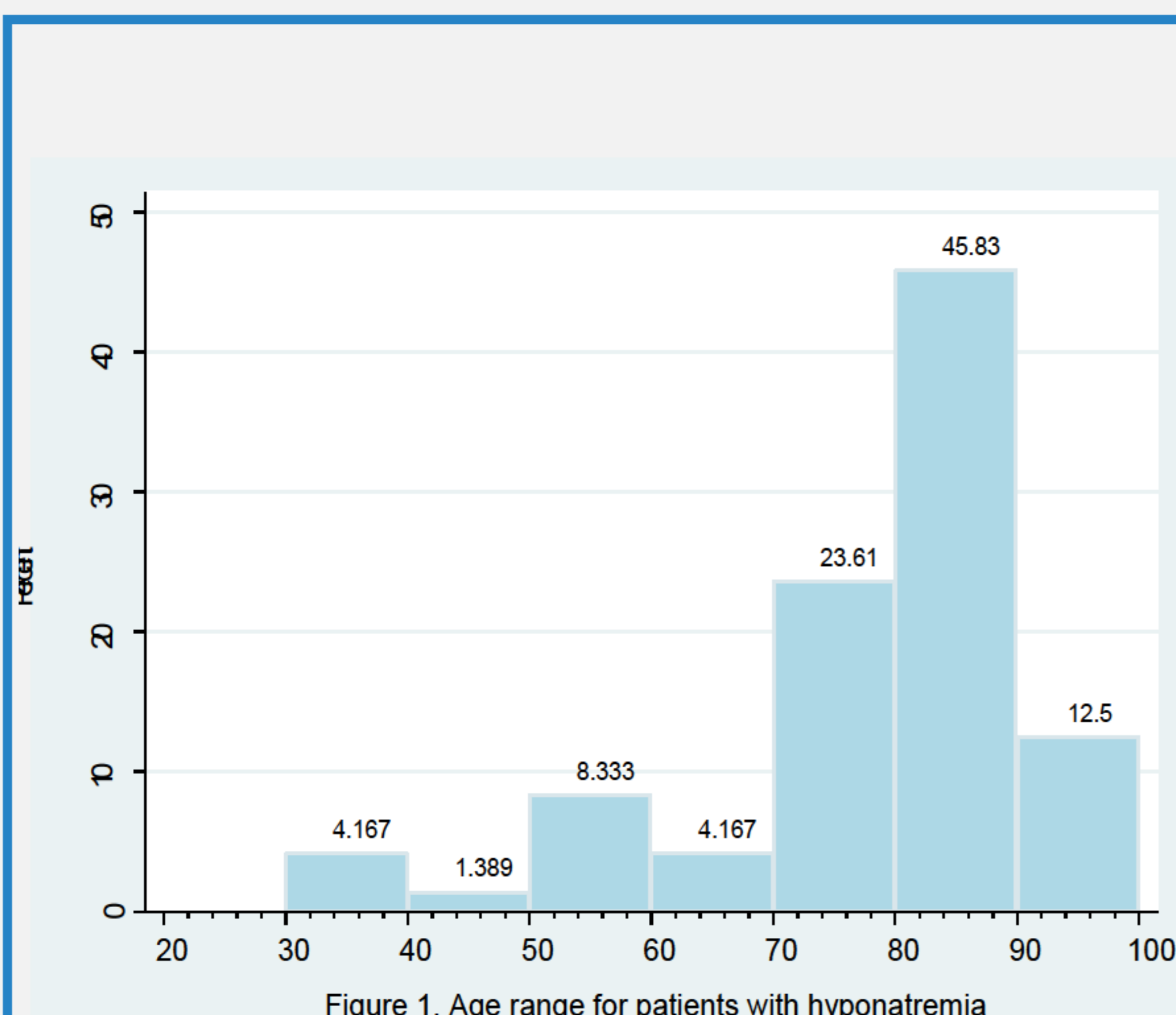
## METHODS

Cross sectional study is carried out at the University General Hospital of Valencia, comprising a population of 350,000. 681 of the 30676 patients admitted during the period from January 2014 to December 2015 had hyponatremia included as a diagnosis at the discharge report. 72 patients admitted in Endocrinology due to hyponatremia are analyzed. We analyzed patient characteristics, mean length of stay, treatment used, serum sodium at admission and discharge, urine and plasma osmolality, urinary sodium and potassium, TSH and cortisol levels, as well as mortality and the presenter prior to hyponatremia.

## RESULTS

Diagnosis of hyponatremia in the discharge report appeared in 2.5%. Of these, 9.6% were admitted in Endocrinology by main diagnosis. Of the 72 patients admitted in our department there were 57 women, with a mean age of  $77.8 \pm 13.61$  years (range 31-98 years) (Fig. 1). Mean length of stay was  $5.7 \pm 3.5$  days and the months of May and June the highest incidence. The most common causes (Fig. 2) were diuretics (38%), SIADH (24%) and multifactorial etiology (23%). Sodium income was  $119 \pm 6$  mEq/l and at discharge was  $132 \pm 3$  mEq/l. 32 patients were classified as "severe" hyponatremia (44,4%). 31% of patients had had low sodium serum levels before admission. Hypertonic saline solution was the first treatment in 8 patients (13,11%) and Tolvaptan was used in 4 of the 72 patients (5,56%). Mortality was 2.8%.

## Graphs and tables



## CONCLUSIONS

Among admissions by hyponatremia, most were women over 75 years and the diuretics were the main etiology. SIADH was diagnosed in similar proportion to other studies. The previous high prevalence of hyponatremia in these patients suggests that a stricter management and monitoring of them might prevent subsequent admissions for this cause.