The prevalence and mortality in Hospitalised Patients with Mild, Moderate and Severe Hyponatremia

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Introduction:

Hyonatraemia, defined as serum sodium < 135 mmol/L is the commonest electrolyte abnormality, especially amongst hospitalised patients and is associated with increased length of stay, morbidity and mortality.

Sex	Freq	Percent	Cum.
F	54,064	55.12	55.12
Μ	44,014	44.88	100.00
Total	98,078	100.00	
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Sodium	Freq.	Percent	Cum.
< 135	4,954	5.05	5.05
135-144	89,224	90.97	96.02
>=145	3,900	3.98	100.00
Total	98,078	100.00	

Aim:

To determine the prevalence of mild, moderate and severe Hyponatraemia in the hospitalised patients and estimate mortality between these three groups and compared against Normonatraemic group.

Methods:

This is an observational retrospective audit in patients admitted to Acute Hospital Trust across 3 sites from July 2010 to July 2011. The data are obtained from hospital clinical laboratory and patients' Data Registry. The admission sodium is used for statistical comparisons. The Hospital Clinical Governance approved the audit. Normonatraemia is defined as Serum Sodium (SNa) 135 to 144 mmol/L, Hyponatraemia as <135 mmol/L and Hypernatraemic as > 145 mmol/L.

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Summary of Ag	e		
Sodium mmol/Ll	Mean	Std. Dev.	Freq.
< 135	67.920065	18.599677	4954
135-144	54.797039	20.515345	89224
>=145	64.819487	19.840263	3900
Total	55.858429	20.677769	98078

agegrp	Freq.	Percent	Cum.	
1	14,858	15.15	15.15	16-30
2	11,351	11.57	26.72	31-40
3	13,770	14.04	40.76	41-50
4	13,711	13.98	54.74	51-60
5	15,737	16.05	70.79	61-70
6	15,721	16.03	86.82	71-80
7	12,930	13.18	100.00	> 80
Total	98,078	100.00		

Results:

The total study population was 98,078. The mean age was 55.85 (+SD20.67) and 55.12% were males and 44.88% were females. 45.26% were 60 years and older and 54.74% was less than 60 years of age. Hyponatraemia was observed in 5.05% on admission. The data showed that there were significant age differences between the different sodium groups with normal range being the youngest and those with severe hyponatraemia, the oldest (p< 0.0001). There were significant differences between gender and sodium levels with men having the highest levels in severe hyponatraemia category (p < 0.001). There were significant differences in mortality according to sodium level with lowest mortality in normal group and the highest death rate in hypernatraemic group (p< 0.001).

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Mortality		Sodium ra	dium range mmol/L			
Within 30 days	< 135	135-144	>=145	Total		
No	4,238	86,805	3,002	94,045		
	85.55	97.29	76.97	95.89		
Yes	716	2,419	898	4,033		
	14.45	2.71	23.03	4.11		
Total	4,954	89,224	3,900	98,078		
	100.00	100.00	100.00	100.00		
Within 1 year				Total		
No	3,773	83,714	2,848	90,335		
	76.16	93.82	73.03	92.11		
Yes	1,181	5,510	1,052	7,743		
	23.84	6.18	26.97	7.89		
Total	4,954	89,224	3,900	98,078		
	100.00	100.00	100.00	100.00		
Within 2 year				Total		
No	3,485	81,260	2,751	87,496		
	70.35	91.07	70.54	89.21		
Yes	1,469	7,964	1,149	10,582		
	29.65	8.93	29.46	10.79		
Total	4,954	89,224	3,900	98,078		
	100.00	100.00	100.00	100.00		

Conclusion

Hyponatraemia as well as Hypernatraemia is associated with increased mortality compared to Normonatraemic group.

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