Syndrome of Inappropriate Antidiuretic Hormone (SIADH) Nonpharmacologic Interventions

Syndrome of Inappropriate Antidiuretic Hormone (SIADH) occurs when antidiuretic hormone (ADH) which normally regulates the retention of water by the kidneys is secreted in inappropriately increased amounts. Treatment of SIADH is aimed at correcting dilutional hyponatremia, closely monitoring for electrolyte and weight changes, as well as administering medications to decrease fluid retention. This card will cover the nonpharmacologic interventions of monitoring of serum and urine osmolality, recording I&Os with daily weights, restriction of fluid intake, monitoring of cardiovascular and neurological status, as well as initiating seizure precautions.



PLAY PICMONIC

Monitor Serum and Urine Osmolality

Monitor with Syrup and Urinal Ozzy-mole

Ensuring that serum osmolality increases and urine osmolality decreases allows the provider to confirm that the patient is losing serum volume into the urine.

IandOs with Daily Weights

I and O Scale with Daily Weights

Daily weights are the staple for monitoring fluid level in any patient. Carefully monitoring intake and output in these patients is also advised to prevent fluid overload.

Restrict Fluid Intake

Water Intake-pipe with Restrictive-belts

There are not many instances where we restrict fluid intake in patients. SIADH patients are placed on a fluid restriction of 1L/day to promote an increase of serum osmolality. Severe cases may be restricted to 500mL/day.

Monitor Cardiovascular and Neurological Status

Monitor with Heart-with-vessels and Nerve-guy

Excess fluid volume in these patients causes shifts of electrolytes, especially sodium. Careful monitoring of these patient’s CNS function and cardiac status is imperative as these may deteriorate quickly.

Seizure Precautions

Caesar with Precaution-sign

Patients with dilutional hyponatremia are at an increased risk for seizures and should be placed on seizure precautions to ensure safety as low sodium levels often precipitate seizures.

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