

SIADH vs Psychogenic Polydipsia

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פנימית ב'

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SIADH

- Inappropriate excess secretion of Anti-Diuretic Hormone even when plasma osmolarity is low ($<275\text{-}280\text{ mOsm/L}$)
- High **urine osmolality** ($>100\text{ mOsm/L}$)- implying ADH concentrated the urine in the collecting duct
- High **urine Sodium**- the force of reabsorption into the peritubular vessels is reduced
- Low **Uric-Acid** in the blood- reduced reabsorption.

Drugs that induce SIADH

- Vasopressin or desmopressin
- Chlorpropamide
- Oxytocin, high dose
- Vincristine
- Carbamazepine
- Nicotine
- Phenothiazines
- Cyclophosphamide
- Tricyclic antidepressants
- Monoamine oxidase inhibitors
- Serotonin reuptake inhibitors

	SIADH	Psychogenic Polydipsia
ADH	↑	↓ (0)
Plasma osmolarity	↓ <275-280 mOsm/L	↓
Urine osmolality	↑ >100 mOsm/L	↓ 50 mOsm/L
Urine Sodium levels	↑ > 20 meq/L	↓ < 10 meq/L
Increased water intake	↑	↑↑