

## \* Syndrome of Inappropriate ADH

- Normally secretion of ADH depends upon plasma osmolality and blood volume.
- When this mechanism fails on ectopic source secrete ADH, SIADH results.

### Causes:

Tumours: CA lung, leukemia, lymphoma  
Drugs: Vincristine, Chlorpropamide  
Pulmonary: Pneumonia, Pleural effusion, TB.  
Neurogenic: Meningitis, encephalitis  
Endocrine: Addison's disease  
ADH and idiopathic.

### Clinical features

- The symptoms are vague and are likely missed.
- When the level of sodium falls ( $120-125 \text{ mmol/L}$ ) somnolence, anorexia, confusion & depression, due to the cerebral edema.
- When the level falls below  $120 \text{ mmol/L}$  coma, convulsion and focal neurological defects seen.
- Severe  $< 110 \text{ mmol/L}$  is fatal.

### Diagnosis:

- $\downarrow$  Serum sodium level  $\rightarrow$  Below  $125 \text{ mmol/L}$ .
- $\uparrow$  Urine sodium level  $\rightarrow$  Increased.
- Plasma osmolality less than  $270 \text{ mOsm/kg}$ .