**SIADH and CANCER: Diagnostic and Treatment Algorithm**

### Hyponatremia (HN)

**Acute HN (<48h)**
- Check: medication, cardiovascular disease, cirrhosis, glucose level, infection
- Symptoms? → Confusion score

**Chronic HN (>48h) (malignancy established)**
- Check: tumor progression, bulky disease
- Symptoms? → Confusion score

### Etiology

- Non malignancy
- Suspected malignancy
- Check: chest X-ray, CT, biopsy

### Confirmation of Malignancy

- Mild HN: Na > 130 mmol/l
- Moderate HN: Na 125 - 130 mmol/l
- Severe HN: Na < 125 mmol/l
- Symptoms? → Confusion score

### Symptoms? → Confusion Score

- Yes: Tolvaptan
- No: Fluid restriction + NaCl-Tbl.

### Control

- Infusing 3%-NaCl 1ml/kg/h: monitor serum sodium every 1-2 hours; stop as soon symptoms of cerebral edema have resolved (do not exceed more than 10-12mmol/l/24h and 18mmol/l/48h)
- Infusing 3%-NaCl 200ml/6h: monitor serum sodium after 6 hours; stop as soon symptoms of cerebral edema have resolved (do not exceed more than 8-10mmol/l/24h and 18mmol/l/48h)
- Tolvaptan: monitor serum sodium after 6 hours; elevate 3,5-6mmol / Tolvaptan administration

**Note:**
- Systemic edema
- Hypotension
- Sodium urine normal, osmol urine↑
- Thyroid-, adrenal cortex-, renal function

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