

TOLVAPTAN OFF-LABEL USE IN HYPONATREMIA DUE TO HEART FAILURE. A CASE SERIES.

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Background

The vasopressin receptor 2 antagonist **tolvaptan** is an **aquaretic** agent that promotes **water elimination** to resolve **hyponatremia** secondary to the syndrome of inappropriate antidiuretic hormone secretion (SIADH). There are ongoing studies researching its capacity of being effective also in hyponatremia secondary to **heart failure**, in which patients have a body water excess that dilutes sodium.

Purpose

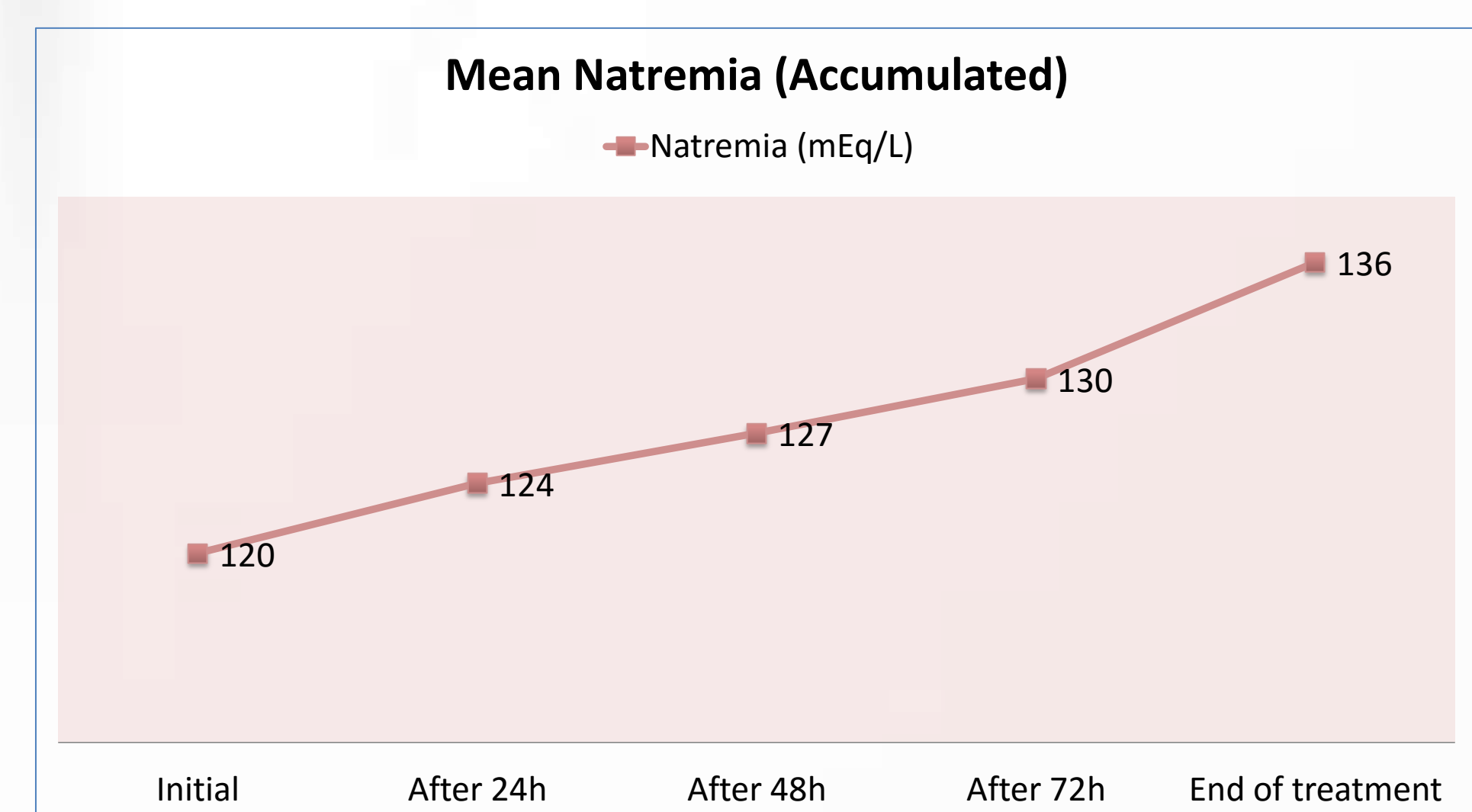
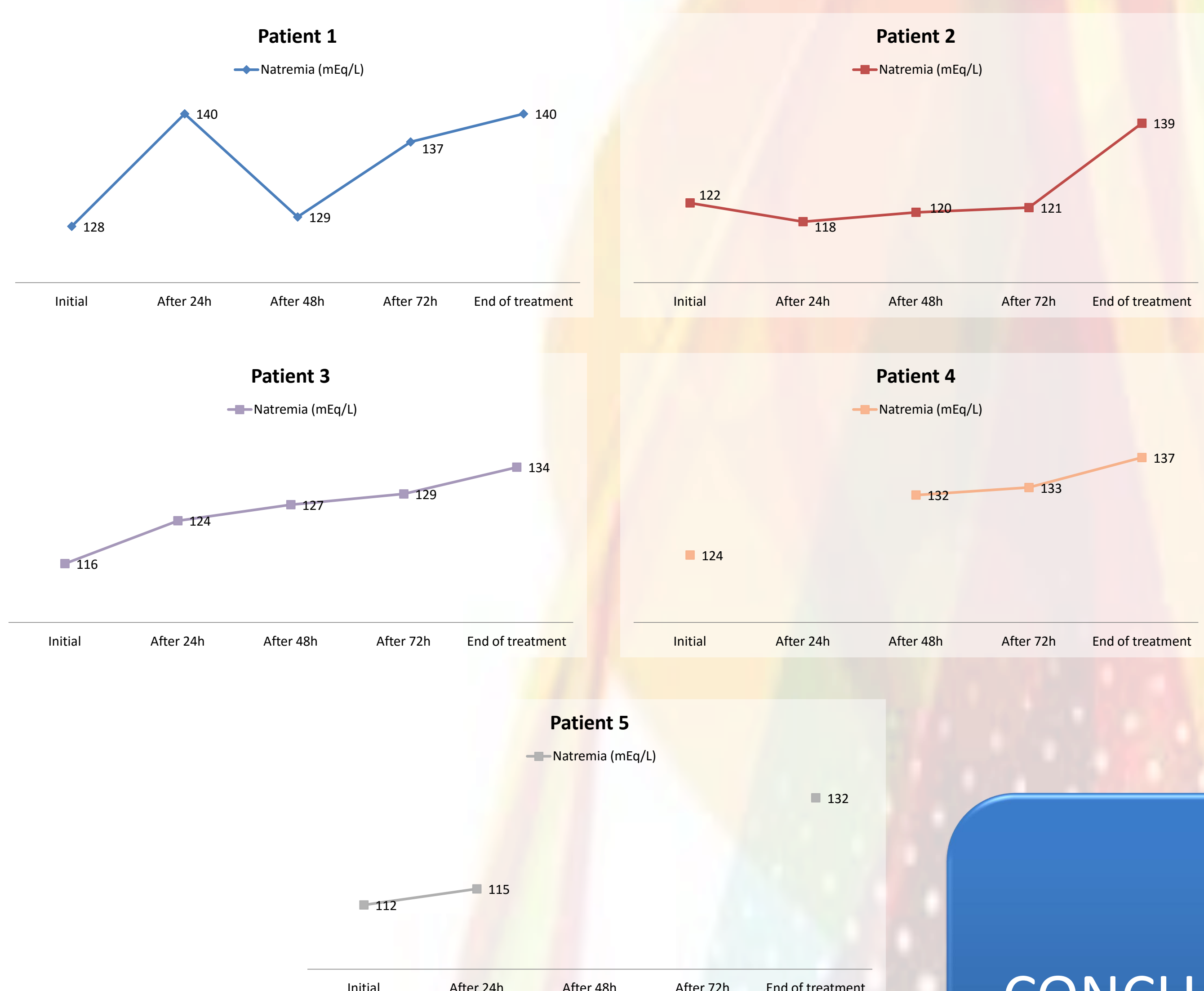
To explore the efficacy of tolvaptan off-label use in hyponatremia secondary to heart failure.

Material and methods

Observational retrospective study carried out in a tertiary care hospital. We conducted a searching to find all the patients treated with tolvaptan. The next step was to identify the off-label use in heart failure. Once the patients were identified, we extracted their demographic data, laboratory tests, and tolvaptan treatment duration and dosages. The data was inserted in an Excel® chart to make a descriptive analysis.

Results

28 patients were found, but only 6 met off-label use criteria. There were 2 women and 4 men. One of them passed away 72 hours after his admission and was excluded. The median age was 70 years old (range 54-80). Only two patients (Patients 1 and 2) had a sodium charge with hypertonic saline fluid before tolvaptan treatment, but their sodium level didn't increase. Neither of them had NaCl oral therapy. During tolvaptan treatment, 3 patients were on furosemide (Patients 3, 4 and 5), one on furosemide + hydrochlorothiazide (Patient 1) and one on furosemide + chlorthalidone + spironolactone (Patient 2).



CONCLUSIONS

- Based on our data, it seems that tolvaptan is an effective option to increase natremia in heart failure patients.
- However, due to our small population, we cannot conclude it categorically.

