Hyponatremia and Psychosis: a case report with review

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Abstract

Introduction: Hyponatremia is known to occur as a rare but clinically important adverse reaction to treatment with different psychotropic drugs, including selective serotonin re-uptake inhibitors and antiepileptic drugs. In past decades, reports have been published that describe the development of hyponatremia in association with antipsychotic drug treatment. Our objective was to review the available evidence on antipsychotic-induced hyponatremia.

Methods: The authors present a case report of a 56 years old woman with the diagnosis of Schizoaffective Disorder taking antipsychotics (clozapine and haloperidol). At the admission she had a serum sodium of 120 mEq/L without any symptomatology. The sodium was corrected with hypertonic solution with an improvement in psychotic symptoms. A literature review of the theme is surveyed.

Results and Conclusions: The incidence of hyponatremia induced by antipsychotics may be much higher than is currently thought. Both the newer atypical antipsychotics and the older drugs have been associated with the development of hyponatremia. Physicians, psychiatrists and other health-care workers should be aware of the possibility of hyponatremia associated with the use of antipsychotics. Further studies are required to establish the risks of and risk factors associated with antipsychotic-induced hyponatremia.

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