

AUDIT OF THE LEVEL OF MONITORING FOR ANTIDEPRESSANT INDUCED HYPONATREMIA IN ELDERLY PATIENTS

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Background

Elderly people commenced on antidepressants, particularly SSRIs are prone to developing hyponatraemia. The Maudsley Guidelines recommends that in patients at high risk of hyponatraemia, serum sodium should be taken at baseline (before commencing the antidepressant) then at two weeks, four weeks and every three months thereafter. High risk patients for antidepressant induced hyponatraemia include the elderly, female gender, low body weight, medical co-morbidities, major surgery, a history of hyponatraemia (or low baseline sodium concentration) and reduced renal function.

Objectives

The purpose of this studying is to assess the level of monitoring of Sodium levels in both primary care and Psychiatry of Old Age (POA) of elderly patients on antidepressants in North Mayo.

Methods

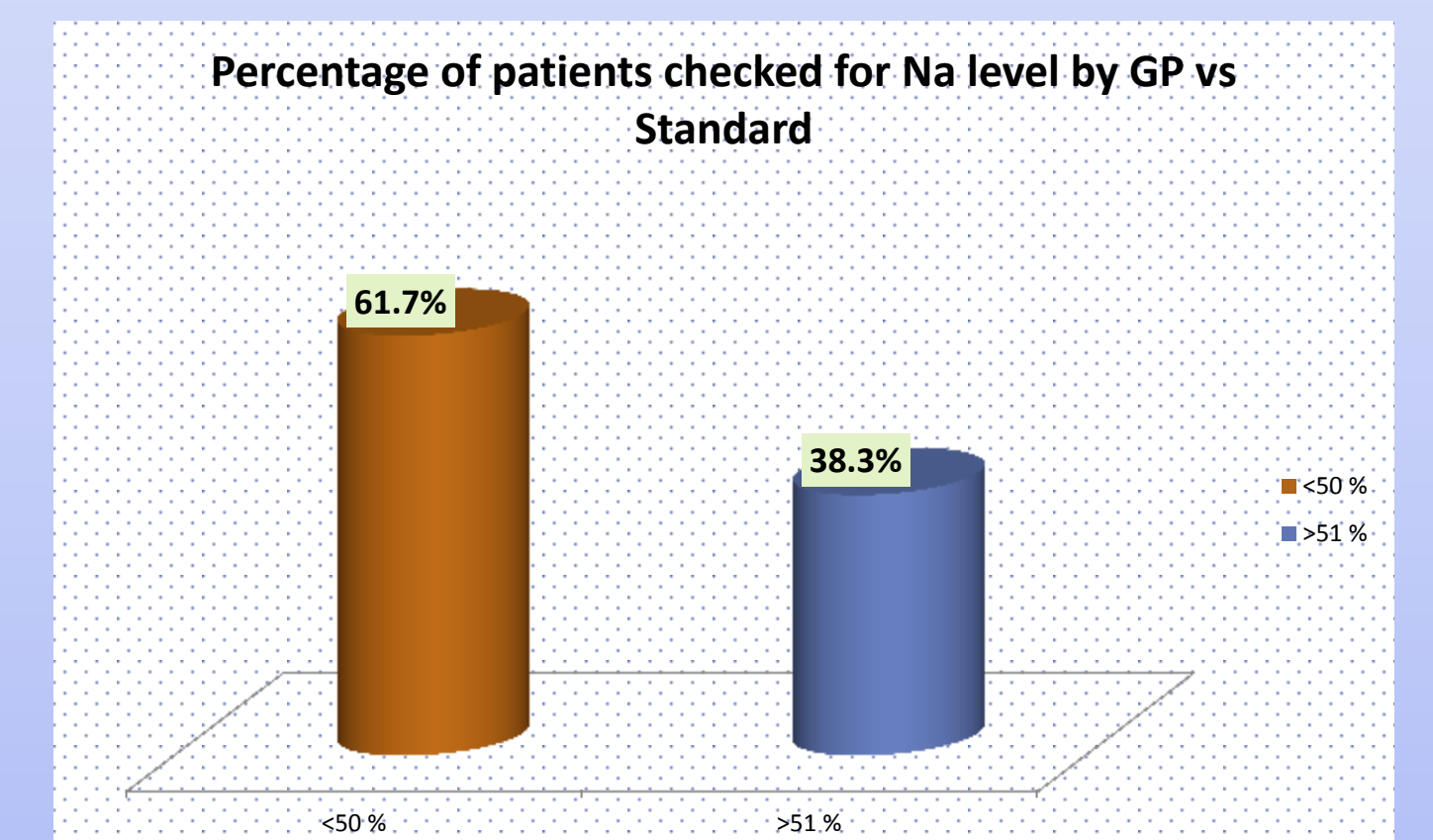
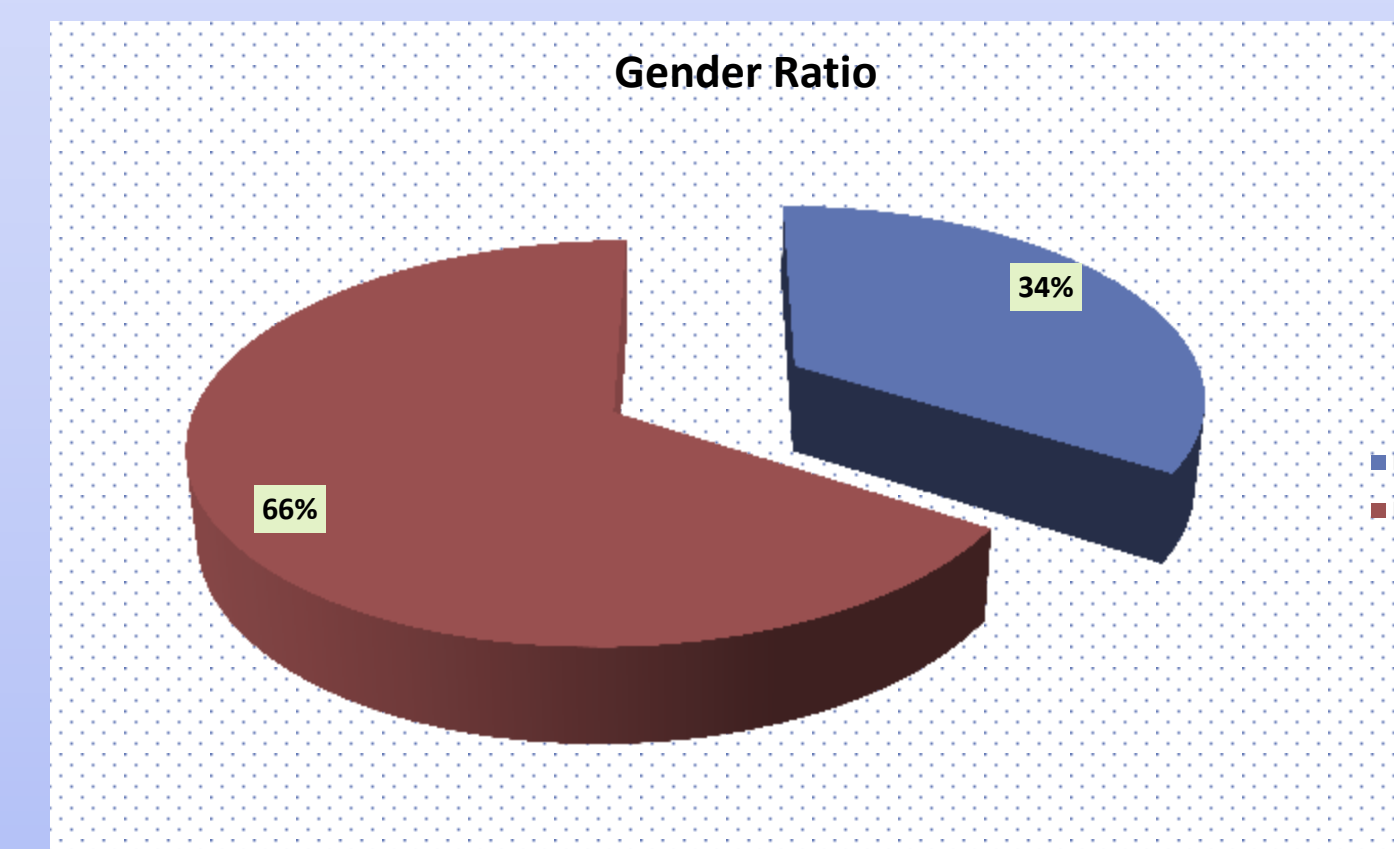
Retrospective lab results for patients under the care of POA team on antidepressants were obtained. If the date the antidepressant was commenced was determinable, all serum sodium were included from that date onwards. Otherwise an arbitrary start date of 01/01/2006 was used. This data was then compared with the Maudsley guideline recommended gold standard for serum sodium monitoring. The second cycle involved attempting to improve adherence to the recommended sodium monitoring from the point of commencing patients on an antidepressant over a seven month period.

Results

The audit tool was applied to 47 patients in the first audit phase and 14 patients in the second phase. One patient from each cycle was excluded from the result as they could not be found on the online lab. system. In the first phase, 31 of the patients were females (66%), 16 were males (34%). 4 of the patients met the gold standard of serum sodium monitoring (8.5%). Thirteen (29%) patients were 50% and above of the gold standard and 29 (61.7%) fell below 50% of the gold standard. In the second cycle, females numbered 10 (71.4%), males 4(28.6%). None of the patients in this phase of the audit met the gold standard. 54% (7) of these however met over 50% of the gold standard and 46% (6) fell below 50% of the gold standard.

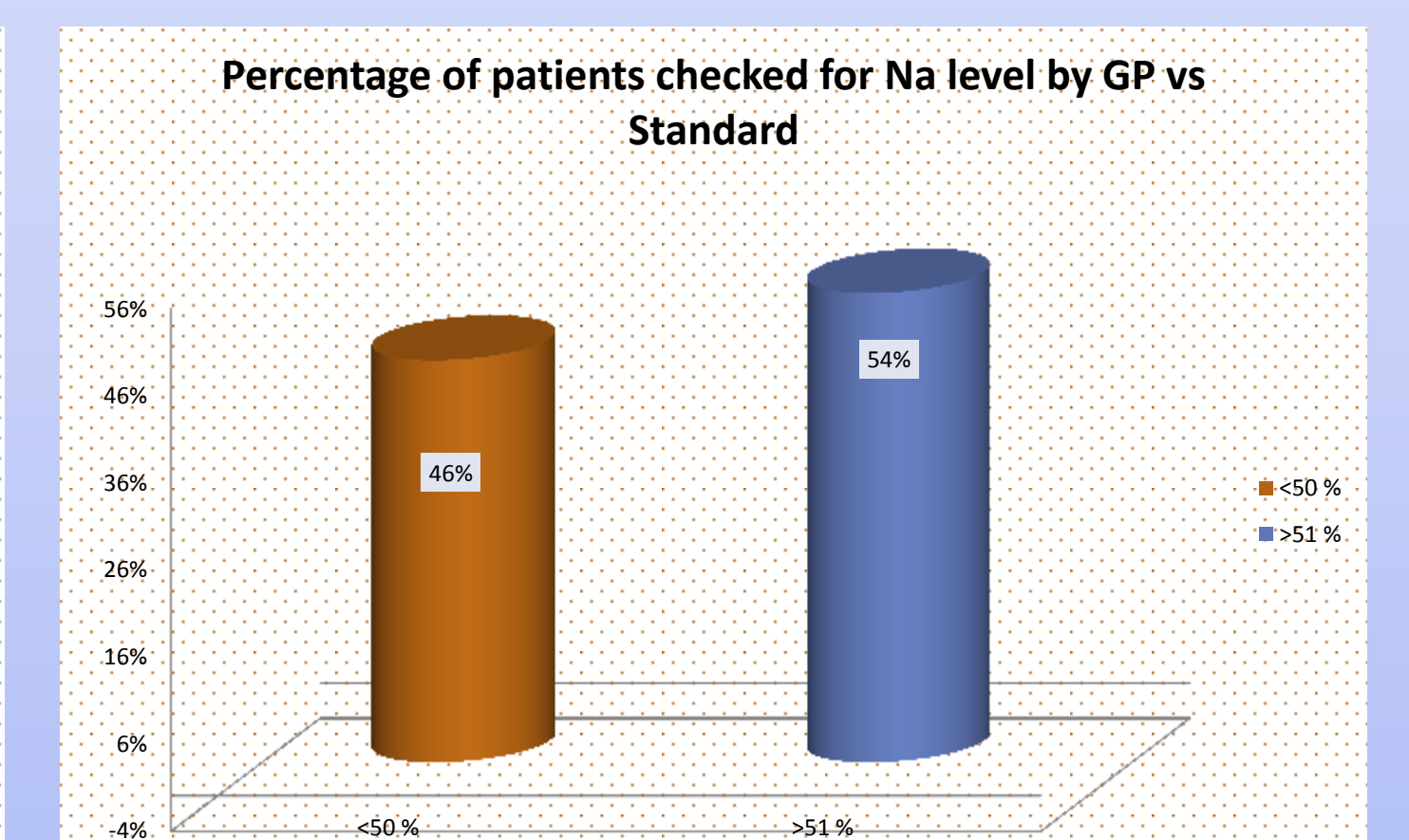
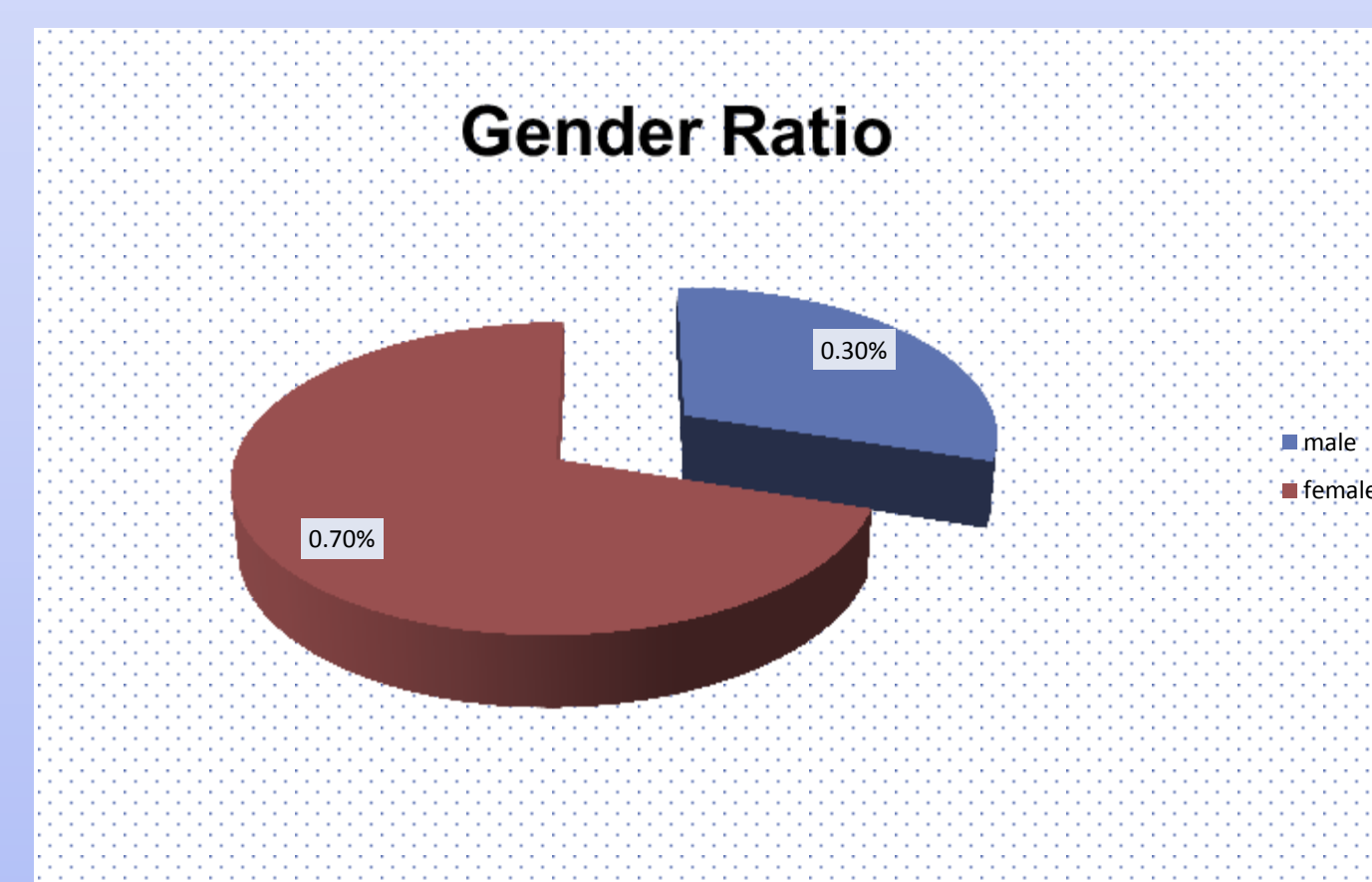
Phase I

	Met < 50 % of the standards	Met > 50 % of the standards	Met the gold standards	Total
Number of patients	29	13	4	46



Phase II

	Met < 50 % of the standards	Met > 50 % of the standards	Met the gold standards	Total
Number of patients	6	7	None	13



Conclusions

Findings suggest some improvement in monitoring of sodium levels in elderly patients on antidepressants. A confounding factor may have resulted in some patients having regular serum electrolyte checks for reasons unrelated to antidepressant therapy