



Società Italiana per l'Ipertensione Arteriosa
Lega Italiana contro l'Ipertensione Arteriosa

**CONGRESSO
INTERREGIONALE
SIIA**

PIEMONTE

LIGURIA

VALLE D'AOSTA

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Aula Magna Ospedale Molinette
Città della Salute e della Scienza di Torino



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Controllo pressorio e disturbi elettrolitici: nuovi approcci terapeutici

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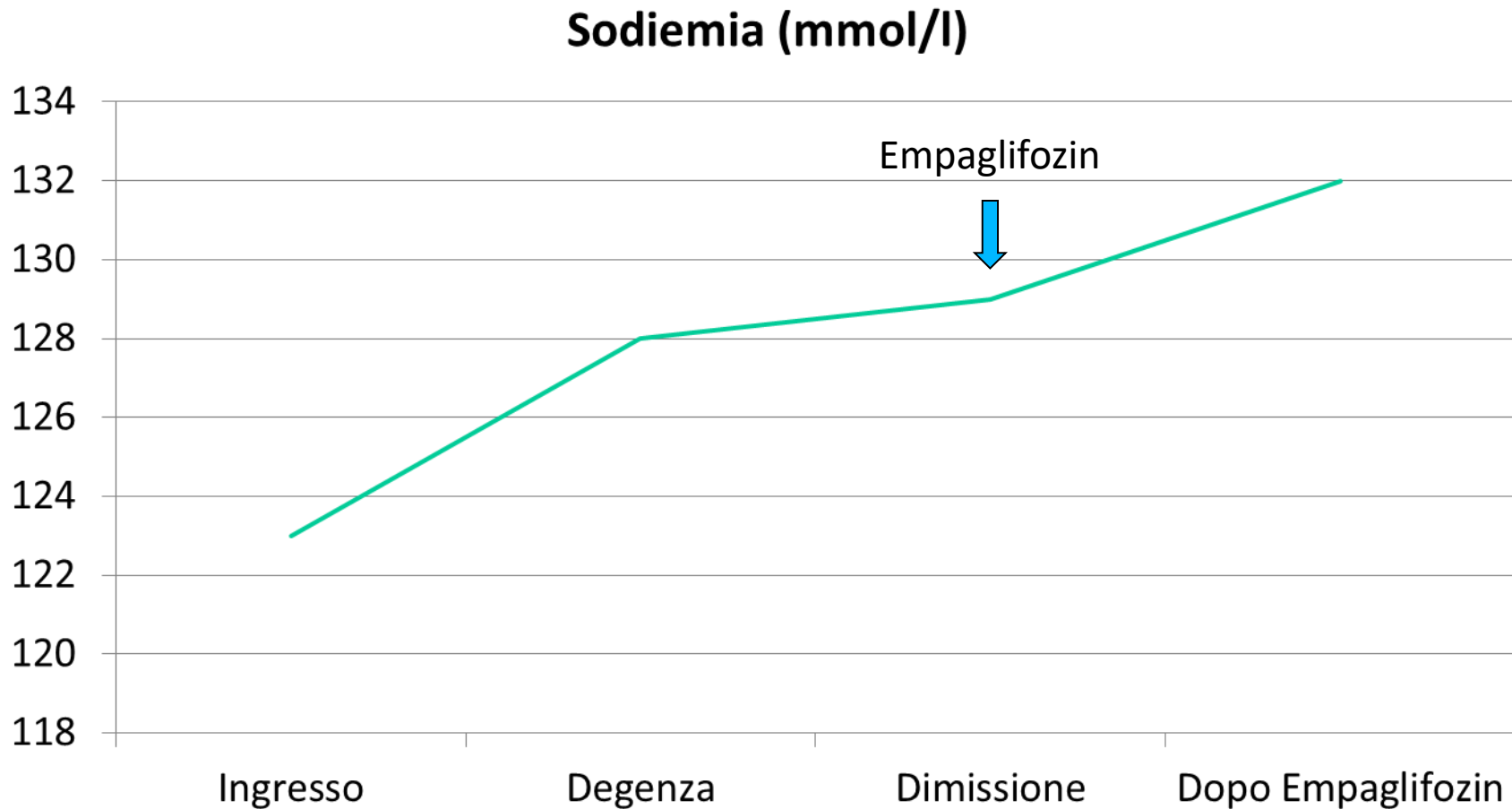
Caso clinico

- Maschio, anni 85
- DMT2
- Cardiopatia ischemica rivascolarizzata, FE 48%
- FA, assume edoxaban
- Segnalato pregresso riscontro di iponatremia
- Il 30/10/2020 ricovero per scompenso cardiaco congestizio con versamento pleurico bilaterale, edemi diffusi
- Funzione renale conservata (eGFR 77 ml/min)

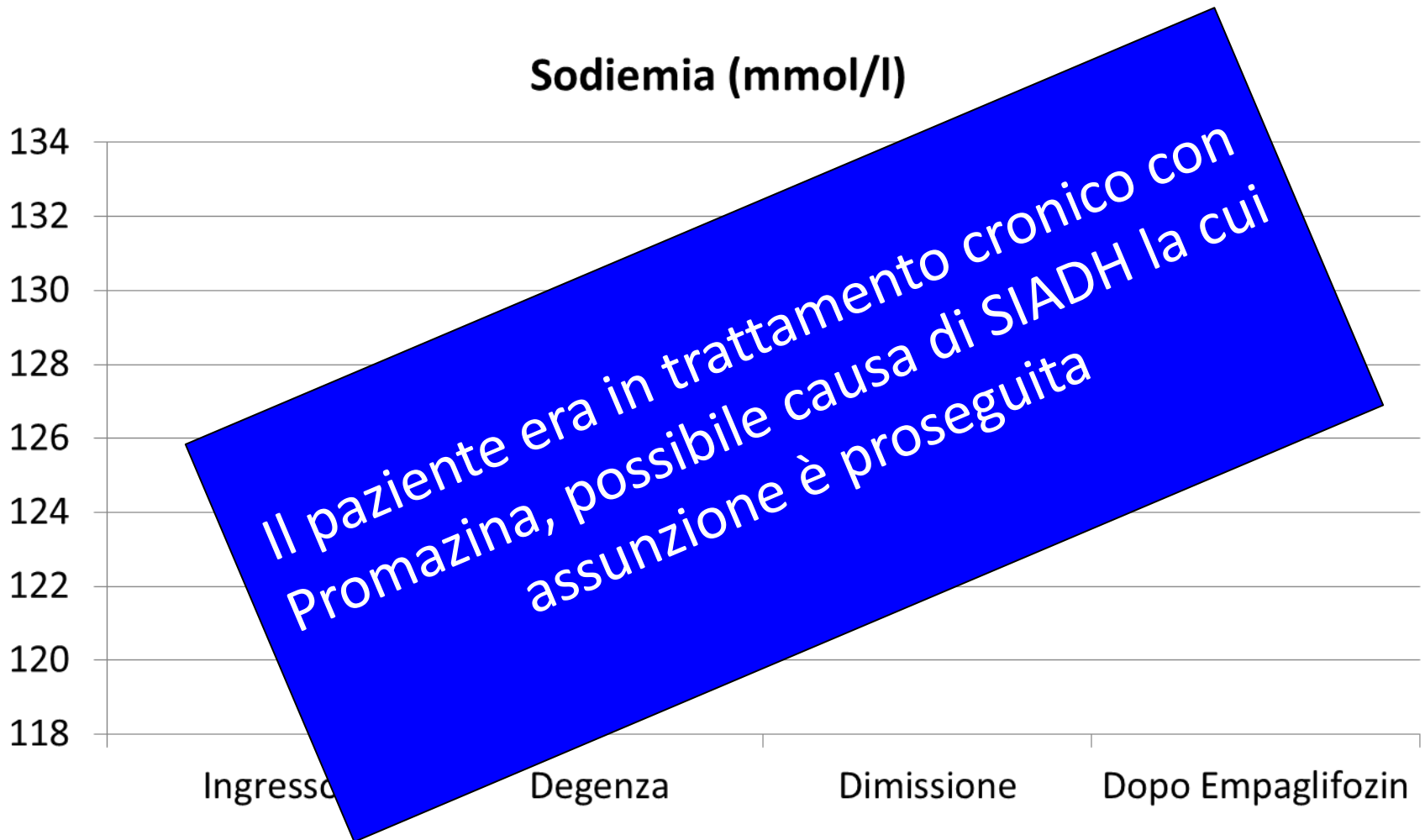
Caso clinico

- Sottoposto a restrizione idrica, terapia diuretica (furosemide+MRA) con calo ponderale di 17 Kg e scomparsa dei segni di congestione.
- Dopo la dimissione visita diabetologica con inserimento in terapia (oltre all'Insulina Glargine) di empaglifozin 25 mg/die.

Andamento Natremia



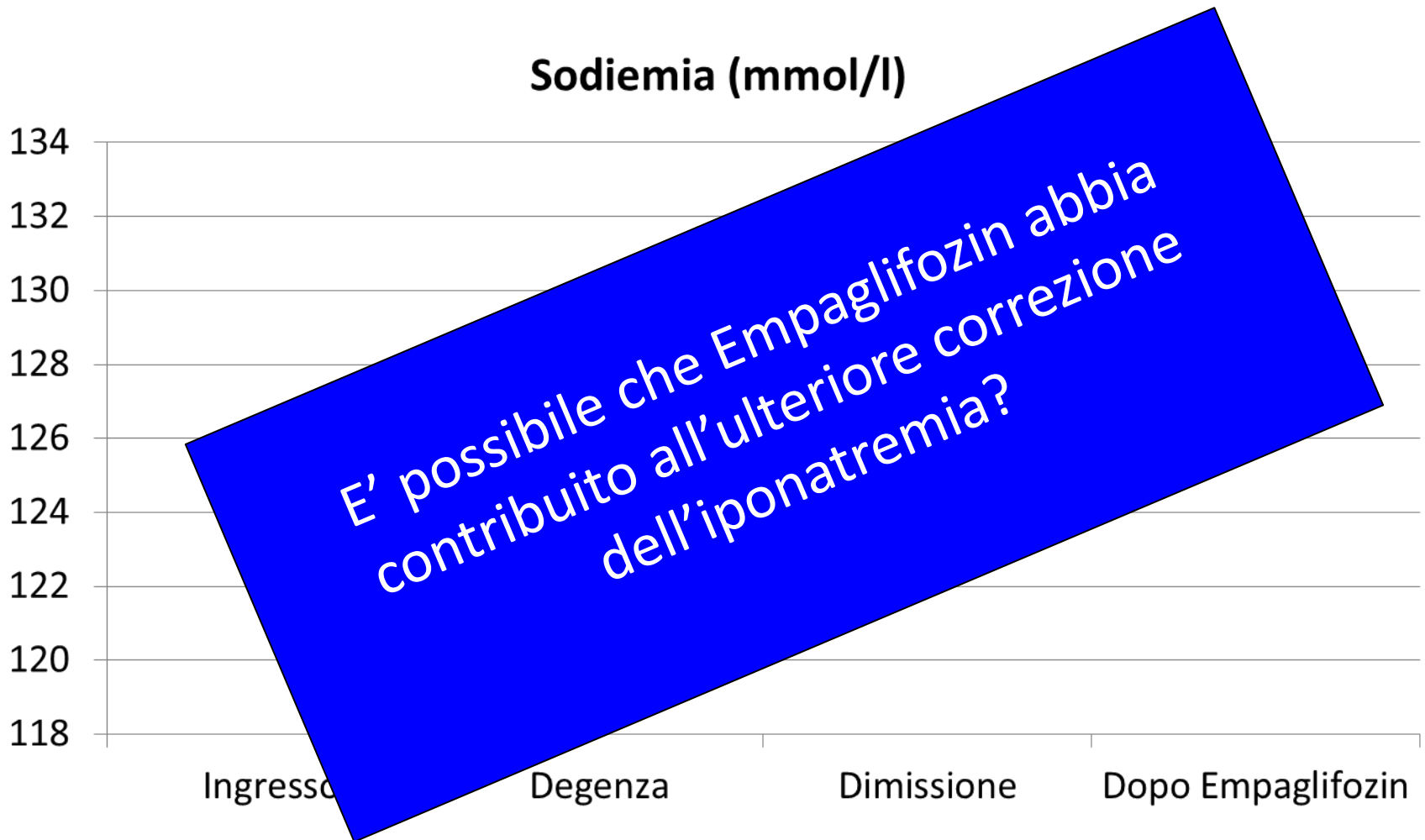
Andamento Natremia



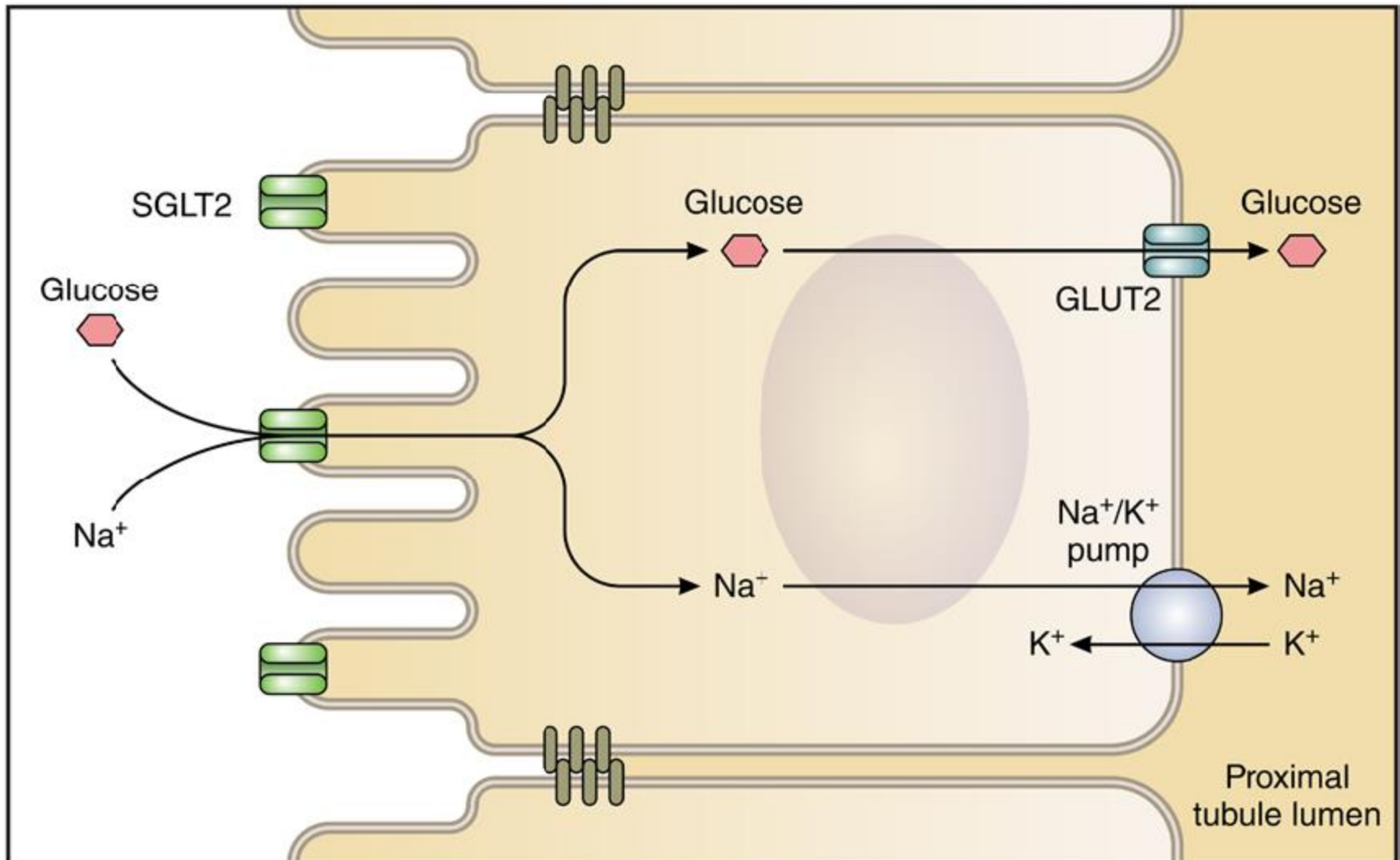
Criteri diagnostici di SIADH

- ✓ Na <130 mmol/L (**129 mmol/l**)
- ✓ Euvolemia (**risoluzione completa congestione**)
- ✓ Osmolarità plasmatica <275 mOsmol/kg, (**263 mOsmol/kg**)
- ✓ Osmolarità urinaria >100 mOsmol/kg (**488 mOsmol/kg**)
- ✓ Sodiuria >30 mmol/L, (**103 mmol/l**)
- ✓ Esclusione di ipotiroidismo (**TSH 0,71 uUI/ml**)

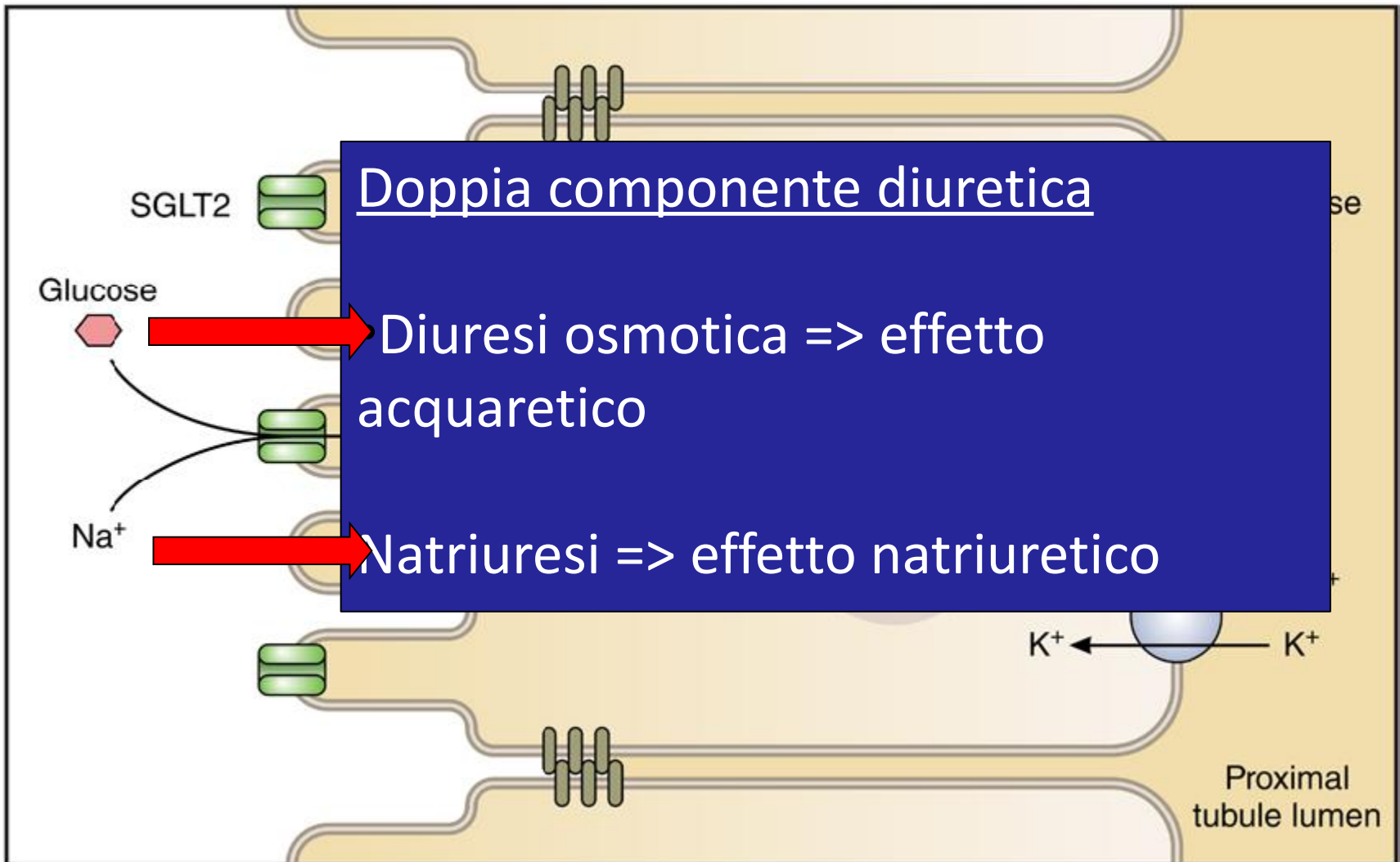
Andamento Natremia



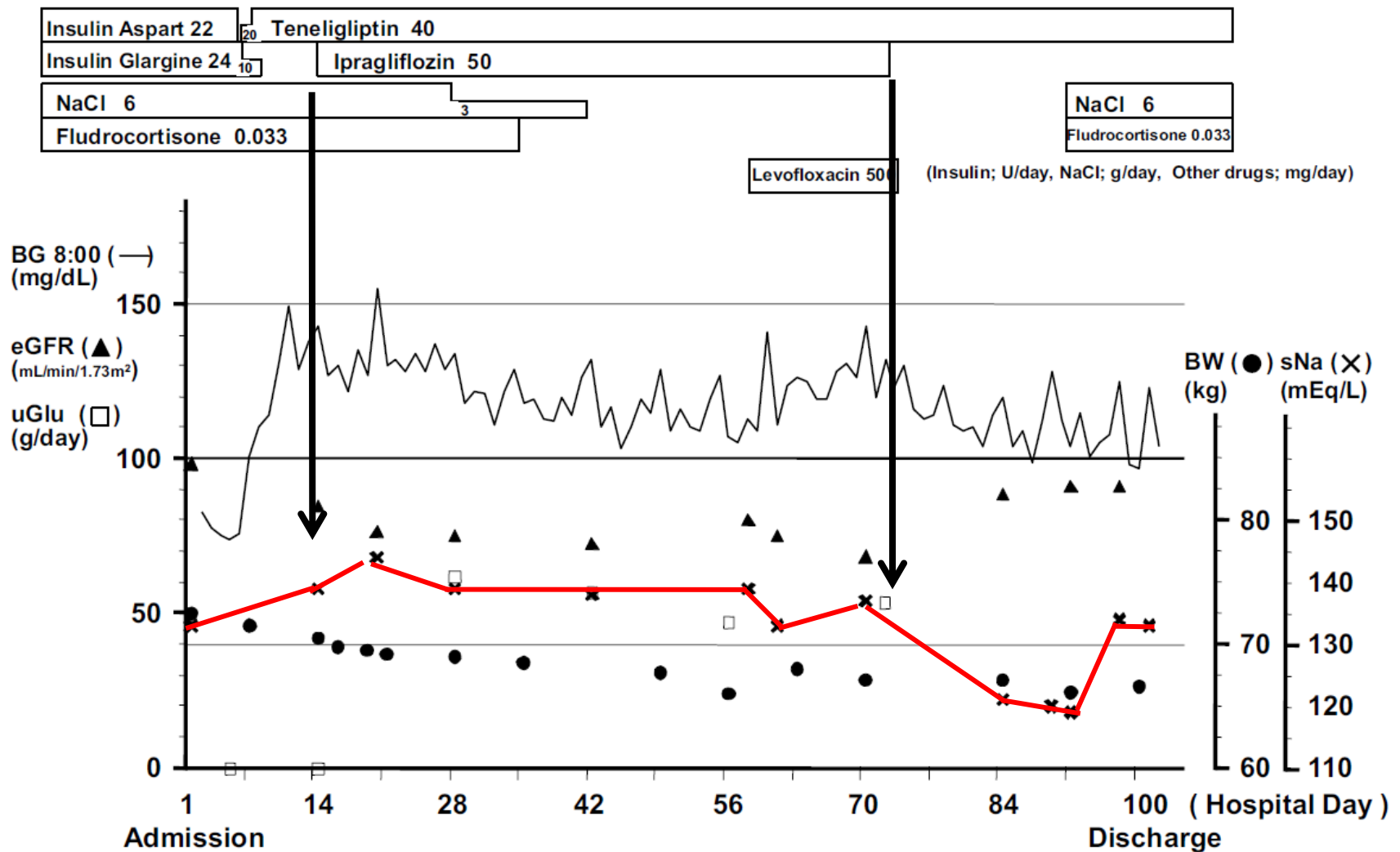
The sodium-glucose cotransporter-2 (SGLT2) mechanism in the proximal tubule



The sodium-glucose cotransporter-2 (SGLT2) mechanism in the proximal tubule



Fluctuation in Serum Sodium Levels Related to Ipragliflozin Administration in a Patient with Diabetic Nephropathy and Sequela of Traumatic Brain Injury

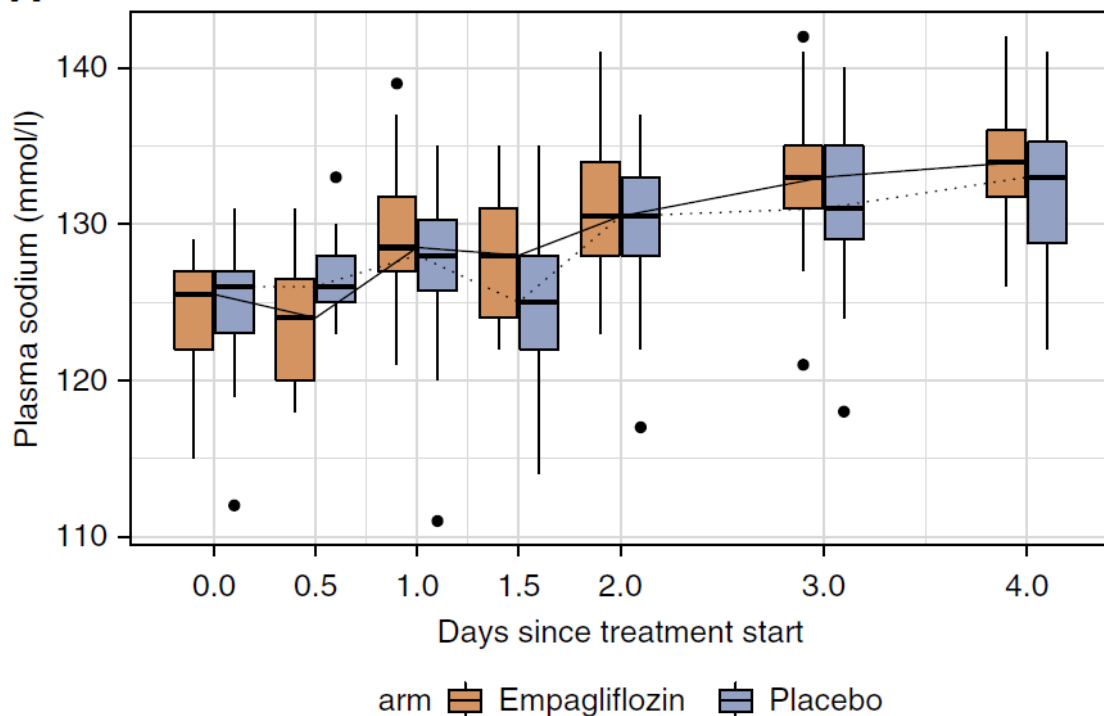


A Randomized Trial of Empagliflozin to Increase Plasma Sodium Levels in Patients with the Syndrome of Inappropriate Antidiuresis

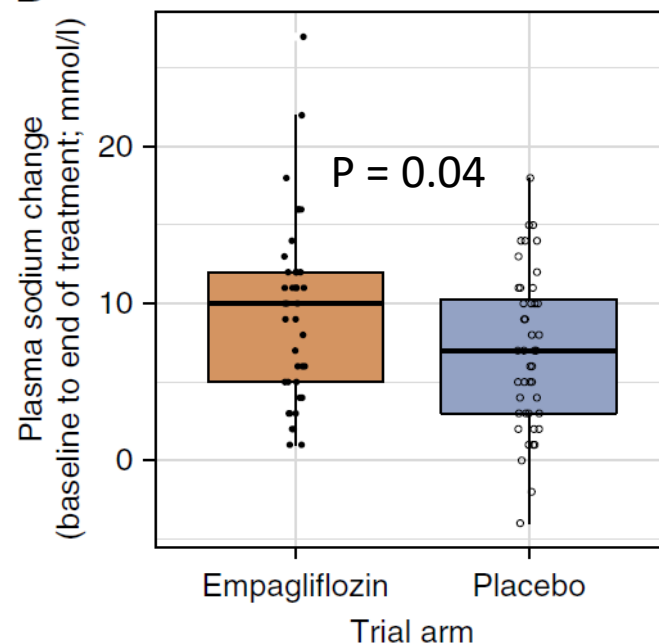
- SIAD-induced hyponatremia <130 mmol/L defined as clinically assessed euvoemia, plasma osmolality <275 mmol/kg, urine osmolality >100 mmol/kg, urine sodium >30 mmol/L, exclusion of hypothyroidism, and hypocortisolism.
- Patients meeting the eligibility requirements were randomly assigned in a 1:1 ratio to receive either oral empagliflozin (25 mg) or matching placebo once daily for 4 days in addition to standard fluid restriction of <1000 ml/d.

A Randomized Trial of Empagliflozin to Increase Plasma Sodium Levels in Patients with the Syndrome of Inappropriate Antidiuresis

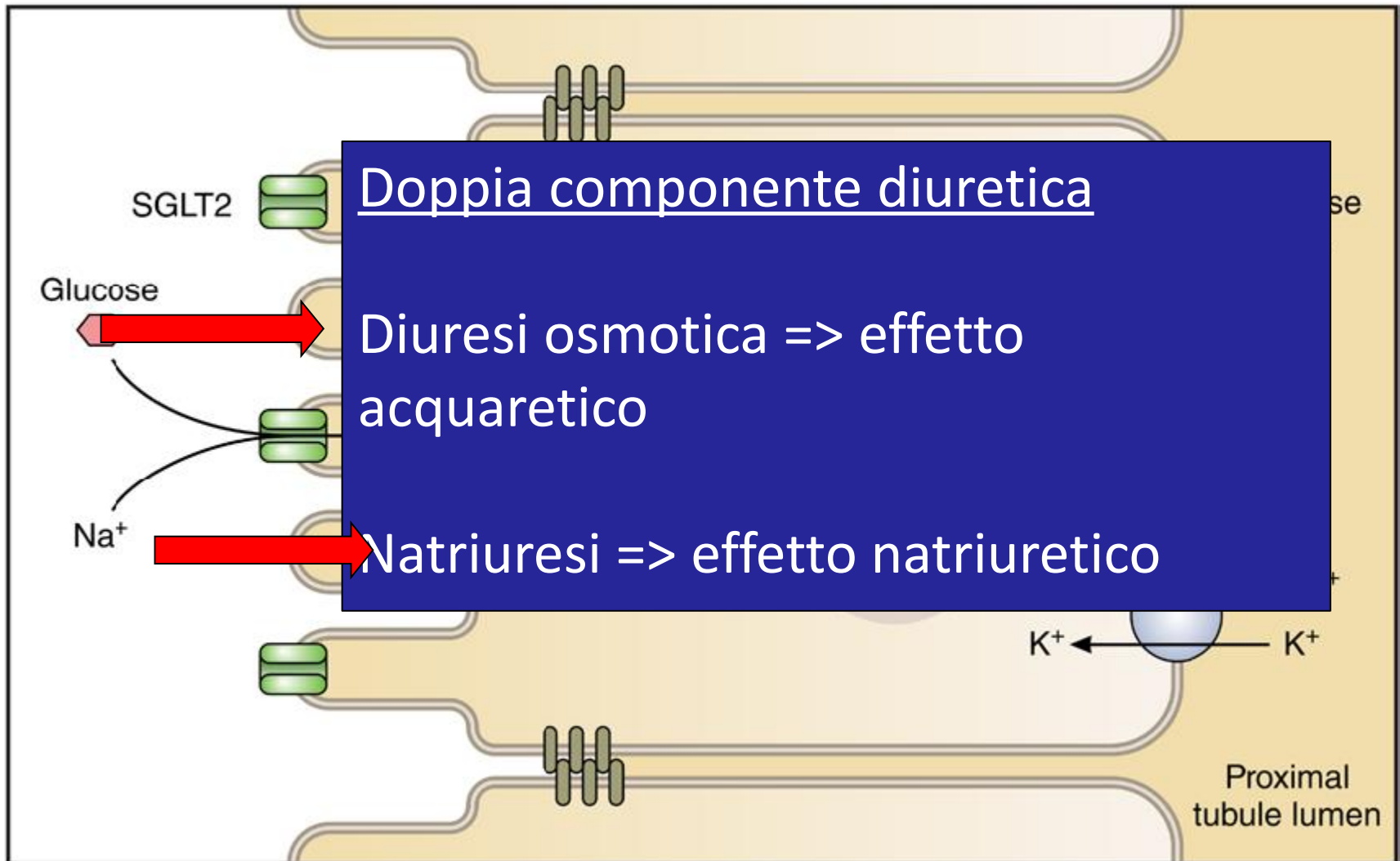
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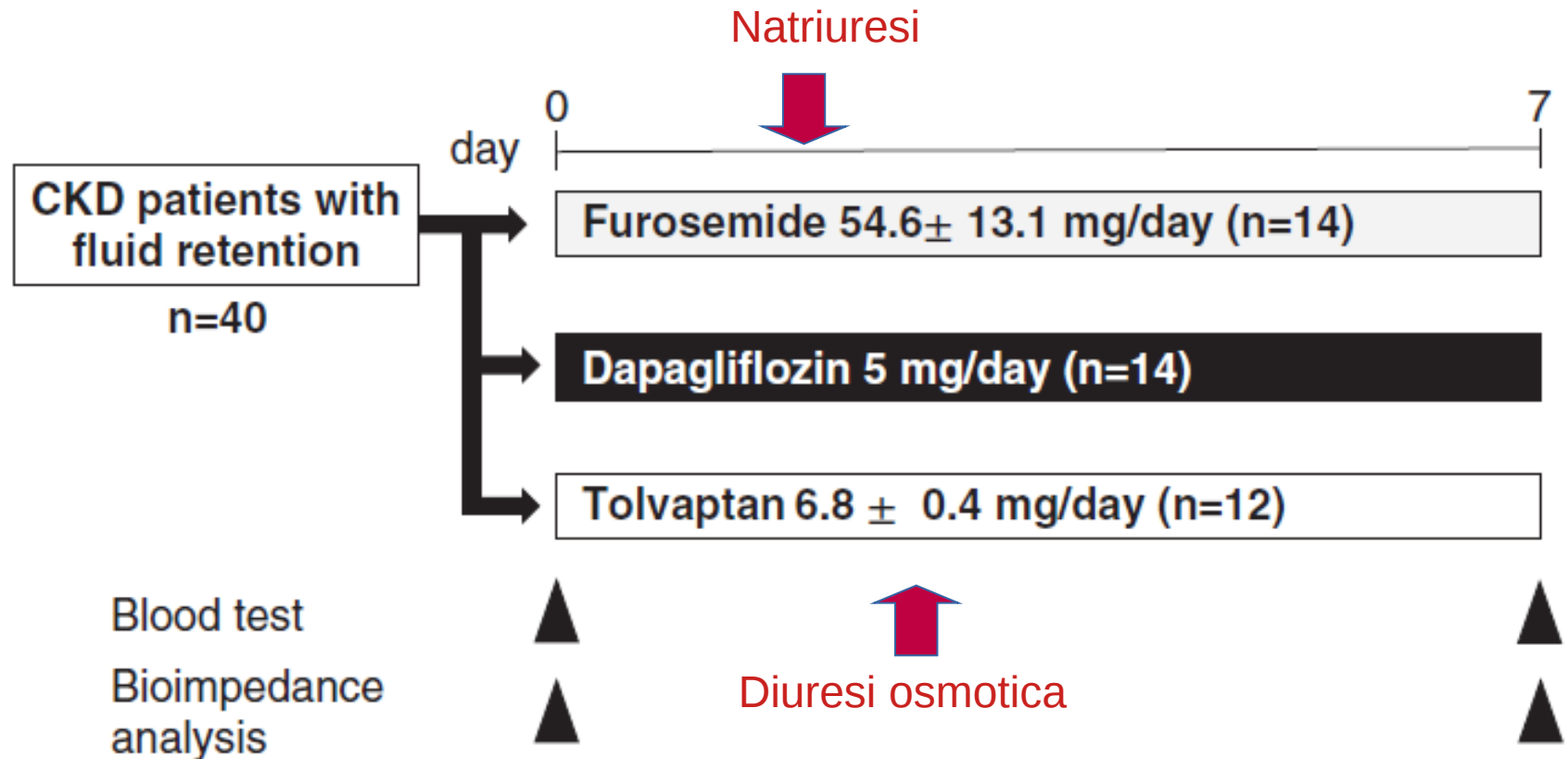
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The sodium-glucose cotransporter-2 (SGLT2) mechanism in the proximal tubule

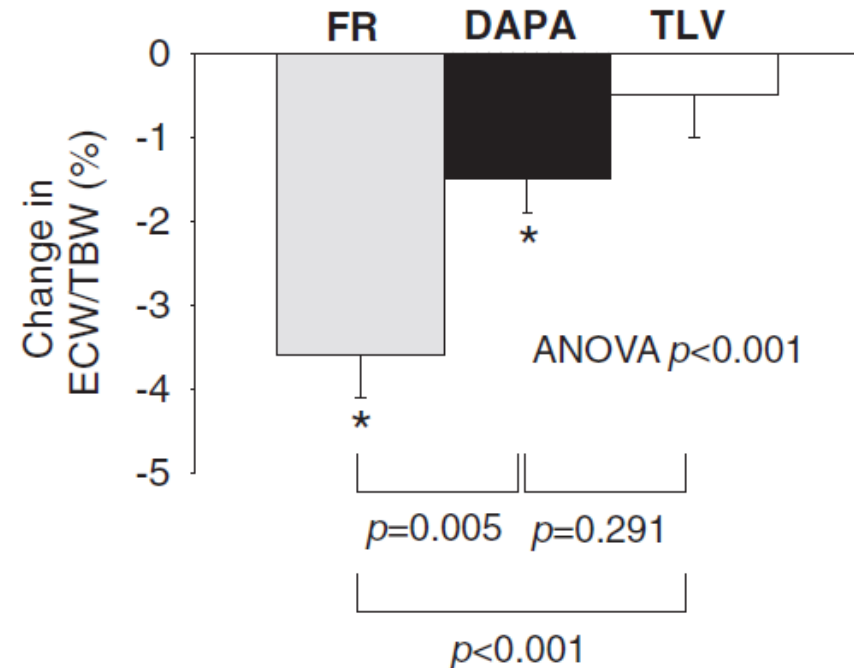
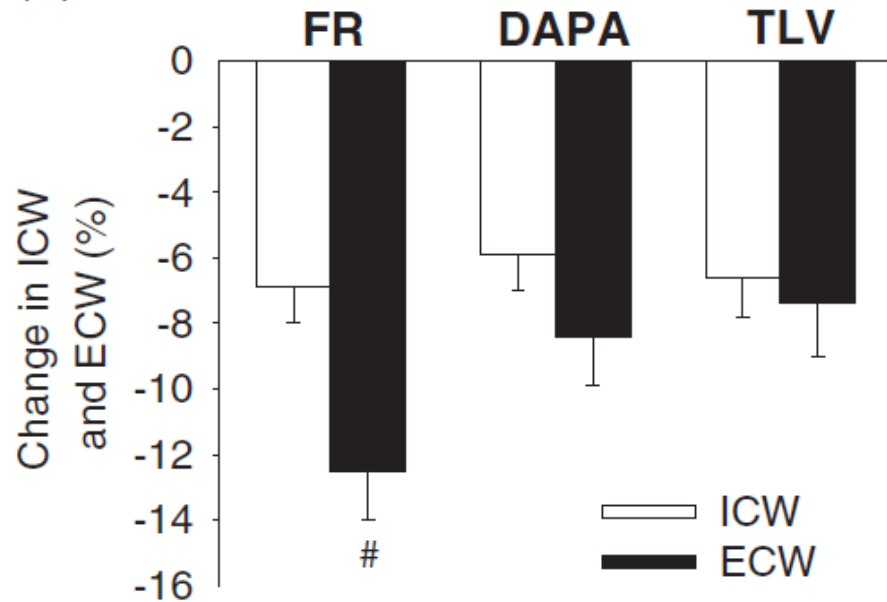


Effects of the sodium-glucose cotransporter 2 inhibitor dapagliflozin on fluid distribution: A comparison study with furosemide and tolvaptan



Effects of the sodium-glucose cotransporter 2 inhibitor dapagliflozin on fluid distribution: A comparison study with furosemide and tolvaptan

(b)



Conclusioni

- Gli SGLT2 inibitori presentano un profilo d'azione a livello del tubulo renale intermedio tra i natriuretici «puri», come la furosemide, e gli acquaretici «puri» come il tolvaptan.
- Questo effetto bilanciato è probabilmente alla base degli effetti positivi osservati in vari studi clinici sull'iponatremia e sullo scompenso cardiaco e contribuisce a proteggere la funzione renale.



Grazie per l'attenzione!