Low-dose desmopressin effective for nocturia

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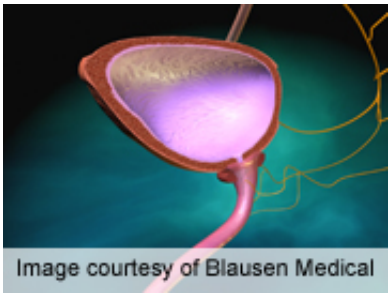

Desmopressin orally disintegrating tablets are effective and well-tolerated for nocturia among women and men at doses of 25 and 50 µg per day, respectively, according to two studies published in the September issue of *The Journal of Urology*.

(HealthDay)—Desmopressin orally disintegrating tablets are effective and well-tolerated for nocturia among women and men at doses of 25 and 50 µg per day, respectively, according to two studies published in the September issue of *The Journal of Urology*.

Peter K. Sand, M.D., from the Northshore University HealthSystem in Evanston, Ill., and colleagues conducted a three-month randomized trial to compare 25 µg desmopressin once daily with placebo in 261 women (aged 19 to 87 years) with nocturia (two or more nocturnal voids). The researchers found that desmopressin correlated with a significant reduction in the mean number of nocturnal voids and with increased odds of a 33 percent or greater response versus placebo during three months (odds ratio, 1.85). At three months, desmopressin correlated with

significantly increased time to first nocturnal void by 49 minutes compared with placebo. Desmopressin was well-tolerated and linked to significant increases in health related quality of life and sleep quality versus placebo.

Jeffrey P. Weiss, M.D., from the SUNY Downstate College of Medicine in Brooklyn, N.Y., and colleagues conducted a three-month randomized trial comparing 50 and 75 µg desmopressin with placebo among 385 men (aged 20 to 87 years) with nocturia. The researchers found that desmopressin correlated with significantly reduced number of nocturnal voids and with increased odds of a 33 percent or greater response (odds ratios, 1.98 and 2.04 for 50 and 75 µg, respectively). The time to first void increased significantly by about 40 minutes from baseline with 50 and 75 µg desmopressin versus placebo.

"In summary, nocturia is a rather simple symptom that is rather complicated to manage. The etiology is often multifactorial and many patients defy categorization," writes the author of an accompanying editorial. "Desmopressin represents a unique treatment option but carries the potential for a severe complication (hyponatremia). Gender specific dosing appears to decrease this risk but monitoring serum sodium levels is still indicated."

Several authors from both studies disclosed financial ties to pharmaceutical companies, including Ferring, which supported the studies and manufactures desmopressin.

More information: Abstract - Sand
Full Text
Abstract - Weiss
Full Text
Editorial (subscription or payment may be required)