TWO DIFFERENT CASES OF SMALL CELL LUNG CANCER WITH SIADH SYNDROME TREATED WITH TOLVAPTAN

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Introduction - Purpose: Syndrome of inappropriate secretion of antidiuretic hormone (SIADH) is a syndrome characterized by hyponatremia and hypoosmolality by an irregular, uncontrolled and excessive release of ADH from the posterior pituitary. Small-cell lung cancer is the most common reason among all cancer cases. Tolvaptan is a competitive selective vasopressin 2 receptor antagonist and is used in the treatment of hyponatremia asociated with SIADH. We wanted to present successful treatment of two small cell lung carcinoma cases with SIADH in our clinic.

Findings : Case 1: A 65-year-old male patient presented with fatigue and sleepiness and his laboratory results revealed his sodium as 114 mmol/L. The patient was referred to our patient's clinic with a biopsy-proven small cell lung carcinoma diagnosed in the left lung. Cisplatin and etoposide treatment was planned in cases with extensive bone metastasis. Due to the planned hydration for protecting from tumor lysis syndrome, tolvaptan 15 mg tablet 1x1 was planned because of reduced levels of : 111 mmol / L. Serum Na was reported as 135 mmol / L on the third day of treatment. Follow-up and treatment of the patient continue. Case 2: A 61-year-old female patient was admitted to our outpatient clinic complaining of dyspnea and dizziness with a diagnosis of small-cell lung carcinoma after bronchoscopic biopsy taken from the upper lobe of the right lung. in the examination performed at the health institution. Serum Na was 119 mmol / L at the time of admission. Cisplatin and etoposide treatment started. Despite suitable replacement serum Na was detected as 121 mmol / L. 15 mg of tolvaptan treatment as 1x1 was planned to the patient. On the third day of treatment the Na level was 133 mmol/L. Follow-up and treatment of the patient continue.

Discussion : Hyponatremia is the most common electrolyte disorder in oncologic patients. Hyponatremia can also cause interruption of chemotherapy especially the treatment with cisplatin and cyclophosphamide, which require intensive hydration. Especially in patients with small cell lung carcinoma, chemotherapy of the patient with tolvaptan can be performed without complication.

Keywords: SMALL CELL LUNG CANCER, SIADH SYNDROME, TOLVAPTAN