Fluid Intake

As DDAVP can cause fluid to be retained by the body it is important to restrict fluid intake after the infusion of DDAVP.

Adults:

Should not drink more than 1– 1.5 litres of fluid (approximately 8-10 cups) in the twenty four hours following DDAVP.

You will pass less urine in the 24 hours after the infusion. If you find you are passing very little in the 24 hours following DDAVP treatment you should contact your Haemophilia Centre.

Children:

A childs fluid intake is restricted to 75% of normal daily fluid requirement in the 24 hours following DDAVP.

If you have any further questions or concerns, please contact your Haemophilia Centre

For more detailed and up to date information on this medicine

Please refer to http://www.hpra.ie/homepage/ medicines/medicines-information/find-a-medicine and search for DDAVP (Desmopressin)

This will list two documents for your reference in the documents section:

- the SmPC is the Summary of Product Characteristics
- the PIL is the Patient Information Leaflet

Contact Details: For Adults

National Coagulation Centre (NCC), St James's Hospital, Dublin 8.

Phone: (01) 416 2141

Galway University Hospital Phone: 091 542348

Cork Coagulation Centre, Cork University Hospital (CCC), Wilton, Cork
Phone: 021 492 2278

For Children

Children's Health Ireland @Crumlin Crumlin, Dublin.

-Between the hours of 8:00-18:00hrs Monday -Friday Phone: (01) 4096939 /4096940/4282749 -After 6pm and at weekends Please phone (01) 4096100 and ask for the Haematology SHO on call

Cork Coagulation Centre, Cork University Hospital (CCC), Wilton, Cork
Phone: 021 492 2278

Desmopressin

Patient Information Leaflet







Introduction

What is DDAVP?

DDAVP (Desmopressin) is a synthetic drug, identical to a hormone found normally in the body

Common Uses

DDAVP has many uses but in the context of bleeding disorders it is used to treat or prevent bleeding in patients with certain conditions such as

- mild Haemophilia A (Factor VIII Deficiency)
- some types of Von Willebrand Disease
- Bleeding Disorder of Unknown cause
- some Platelet Function Disorders

DDAVP is generally not used in children <2yrs or >55yrs of age.

DDAVP cannot be used in the following patients:

- With a moderate or severe renal impairment
- With low levels of salt (sodium) in their blood
- With a history of seizures or epilepsy
- With heart disease including heart failure, atherosclerosis or heart attack

How does it work?

DDAVP stimulates the release of clotting factors Factor VIII and Von Willebrand factor from storage sites in the body into the blood. The levels of the clotting factors are then increased by three to six times the baseline level for 12—24 hours.

If necessary, the dose of DDAVP may be repeated after 24 hours. Repeated infusions may not be as effective because the body doesn't have the chance to rebuild its stores.

DDAVP Trial

Some adults/children do not respond to DDAVP, so it is sometimes necessary to give a trial infusion to assess the response.

Blood samples are taken before and hourly after DDAVP infusion for up to 4 hours.

Occasionally a blood test on the following day will be needed

The response to DDAVP will be assessed as one of three following categories:

- DDAVP responsive: DDAVP is the treatment of choice for all procedures and bleeding episodes
- Partial response to DDAVP: DDAVP can be used only for minor procedures and minor bleeding episodes. An alternative treatment will be necessary for major procedures and major bleeding episodes.
- No response: An alternative treatment will be necessary

Dosage:

The dose is calculated using a persons body weight

How is DDAVP given?

Intravenously—DDAVP is added to a bag of saline. This is then given into a vein through a cannula (a plastic straw in the vein) over 30-60 minutes

Subcutaneously—injected under the skin on your stomach or legs.

Before DDAVP administration

Please inform us of the following:

- Any known reaction to this or any other medications that you are taking in particular diuretics, anti-depressants or any over the counter medications
- Have an illness causing fluid and/or electrolyte imbalance e.g. vomiting, diarrhoea, infections or fever
- Pregnancy or breastfeeding
- Any significant medical problems including:

Heart Disease Kidney disease Epilepsy

Side effects of DDAVP

Occasional side effects include:

- Headache
- Facial flushing
- Stomach pain and nausea
- Allergic reactions
- Decrease in blood pressure
- · An increase in heart rate
- Rarely increased aggression in children

Treatment with DDAVP without reducing fluid intake may lead to fluid retention, dilution of salt in the blood (Hyponatraemia) and in very severe cases, epileptic seizures. If these side effects occur, you must seek medical advice immediately and your Consultant Haematologist may advise an alternative treatment to DDAVP. People who may be on anti-depressants such as SSRI (Sertraline) may be at increased risk of low salt levels (Hyponatraemia)