

CHARACTERISTICS OF NYCTHEMERAL RHYTHM OF URINARY WATER AND SOLUTE EXCRETION IN CHILDREN WITH ENURESIS REFERRED TO A TERTIARY CENTER

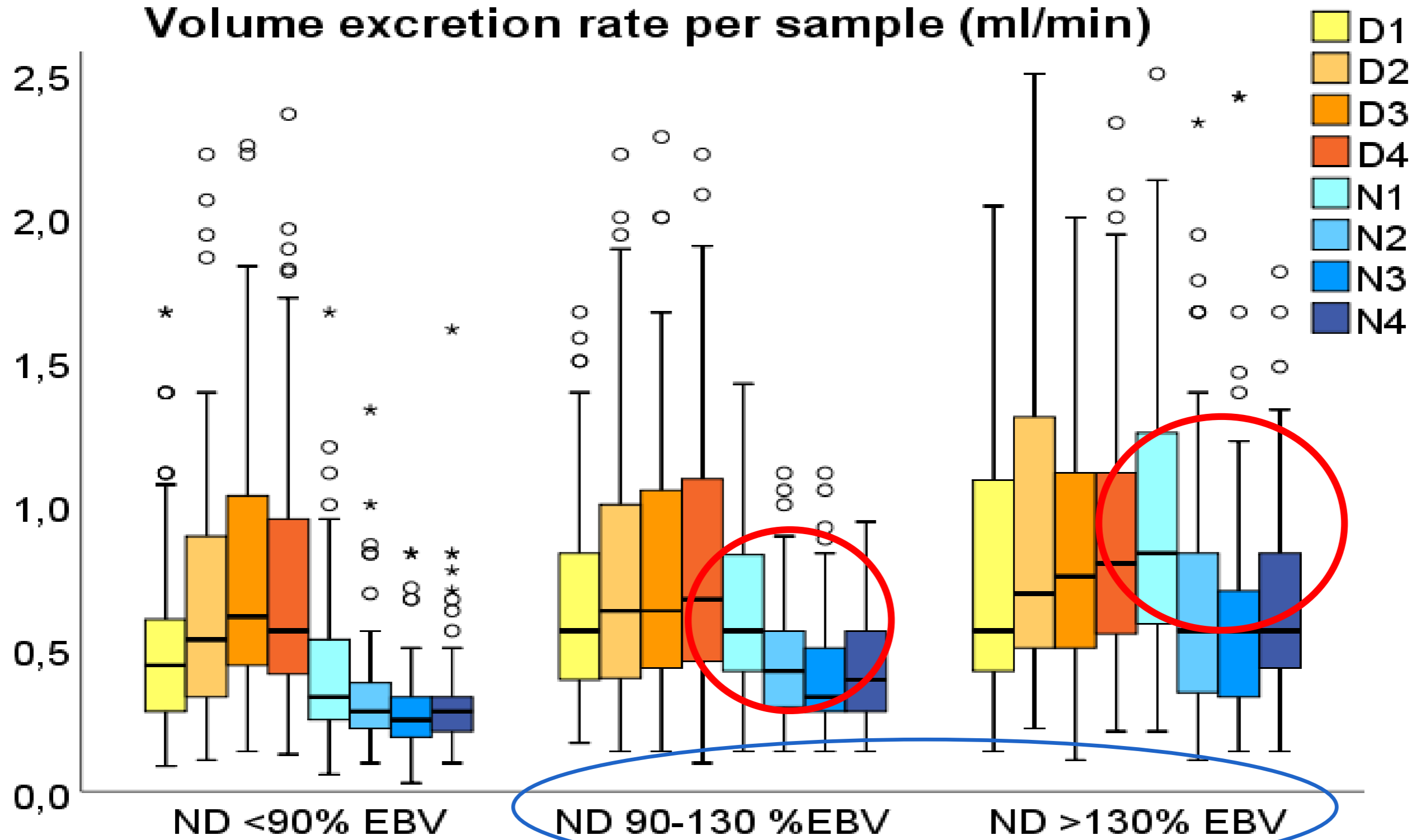
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MATERIALS AND METHODS

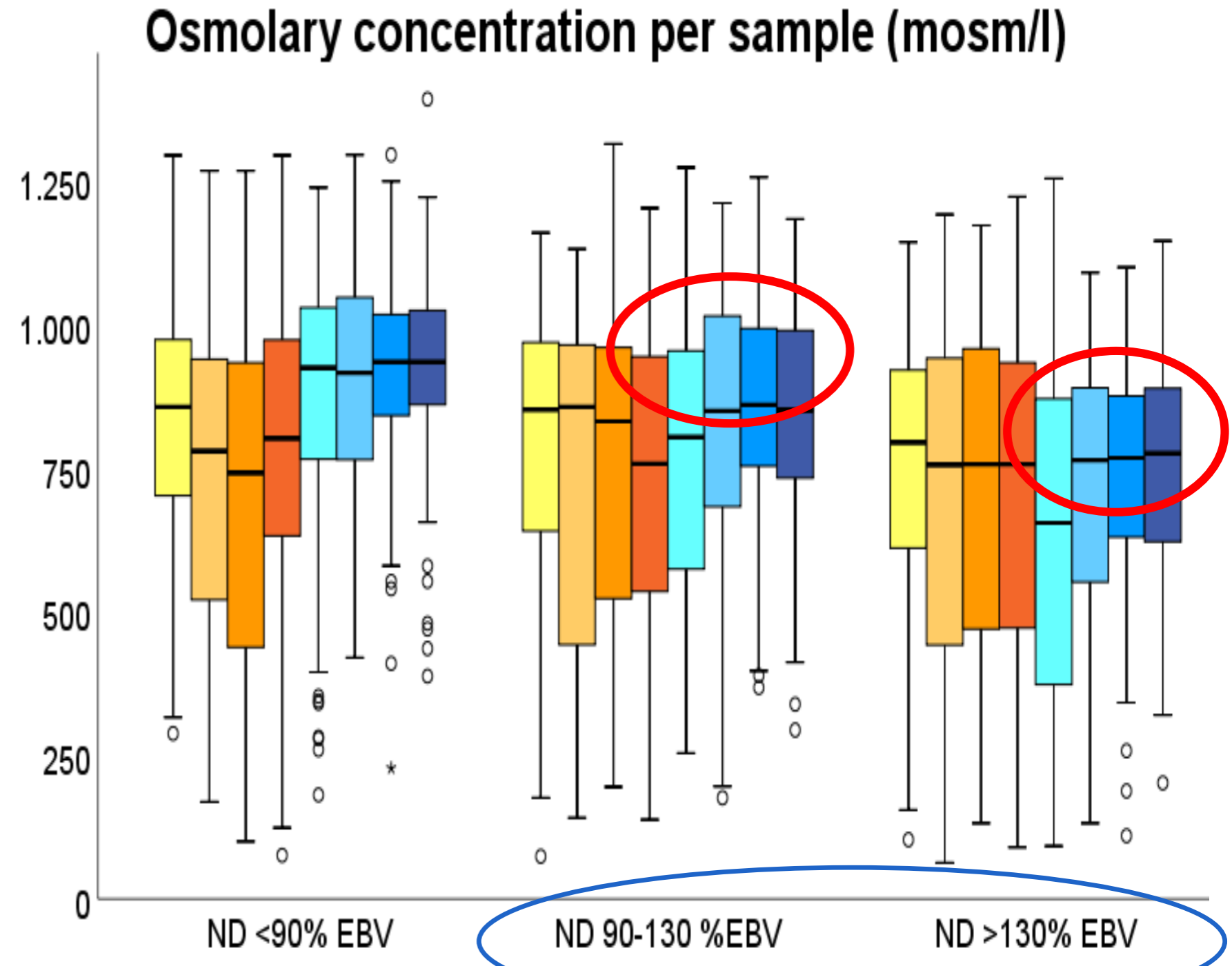
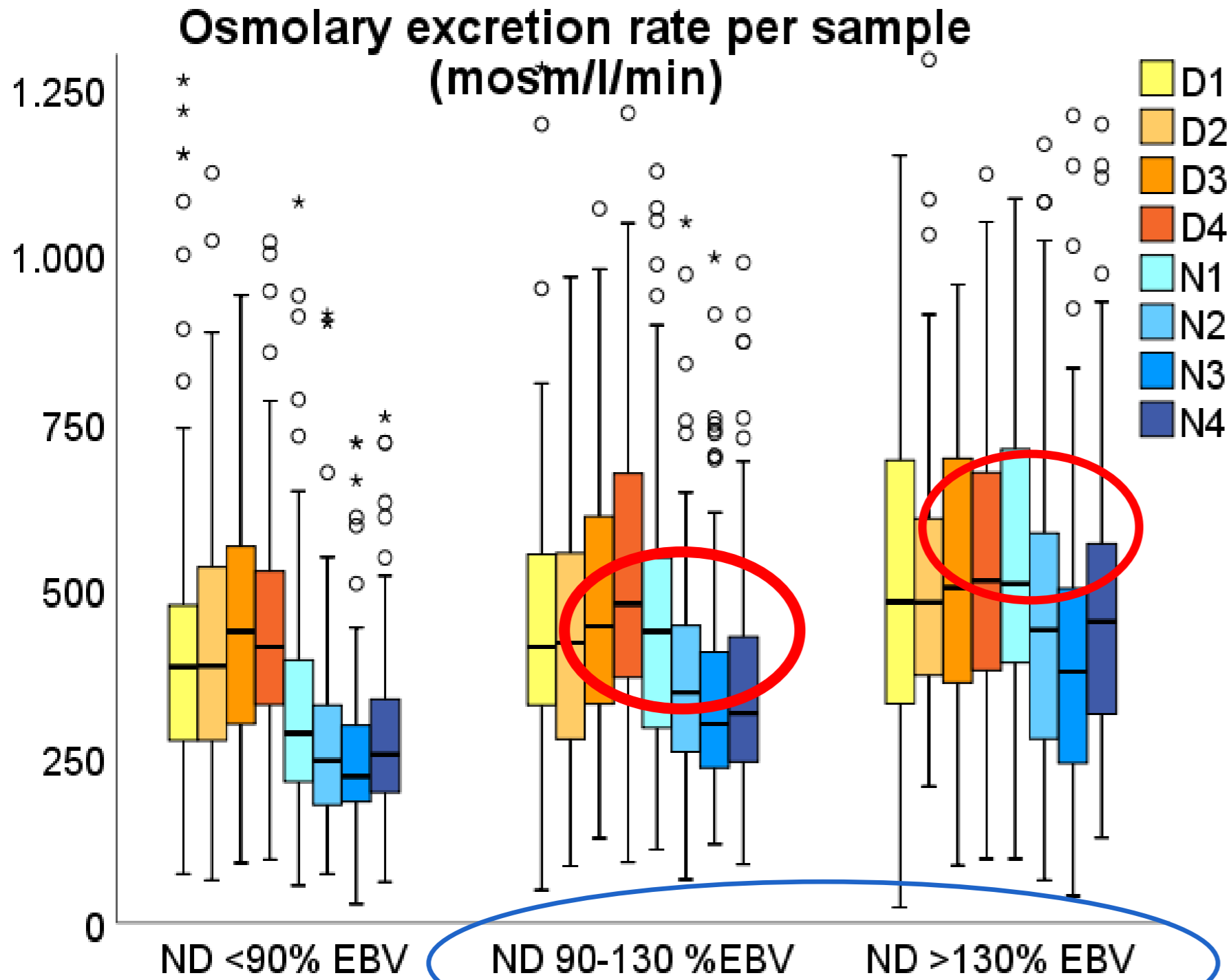
- retrospective study
- 402 children with enuresis
- 24hour urine concentration profile at a home setting (4 day and 4 night samples): volume, osmolality, creatinin

- 3 subgroups:
 - a) low-normal nocturnal diuresis: <90% of EBC (113 cases)
 - b) high-normal nocturnal diuresis: 90-130% of EBC (103 cases)
 - c) Nocturnal polyuria:>130% of EBC (91 cases)

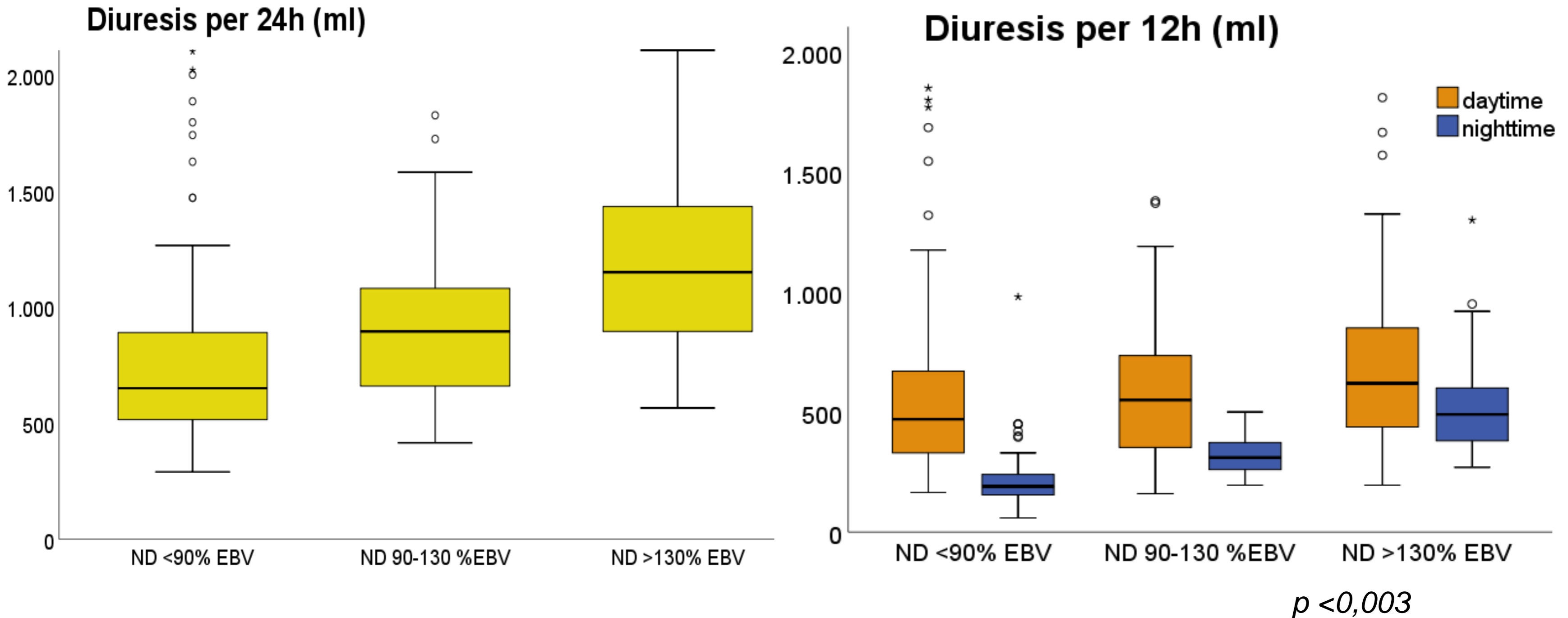
RESULTS



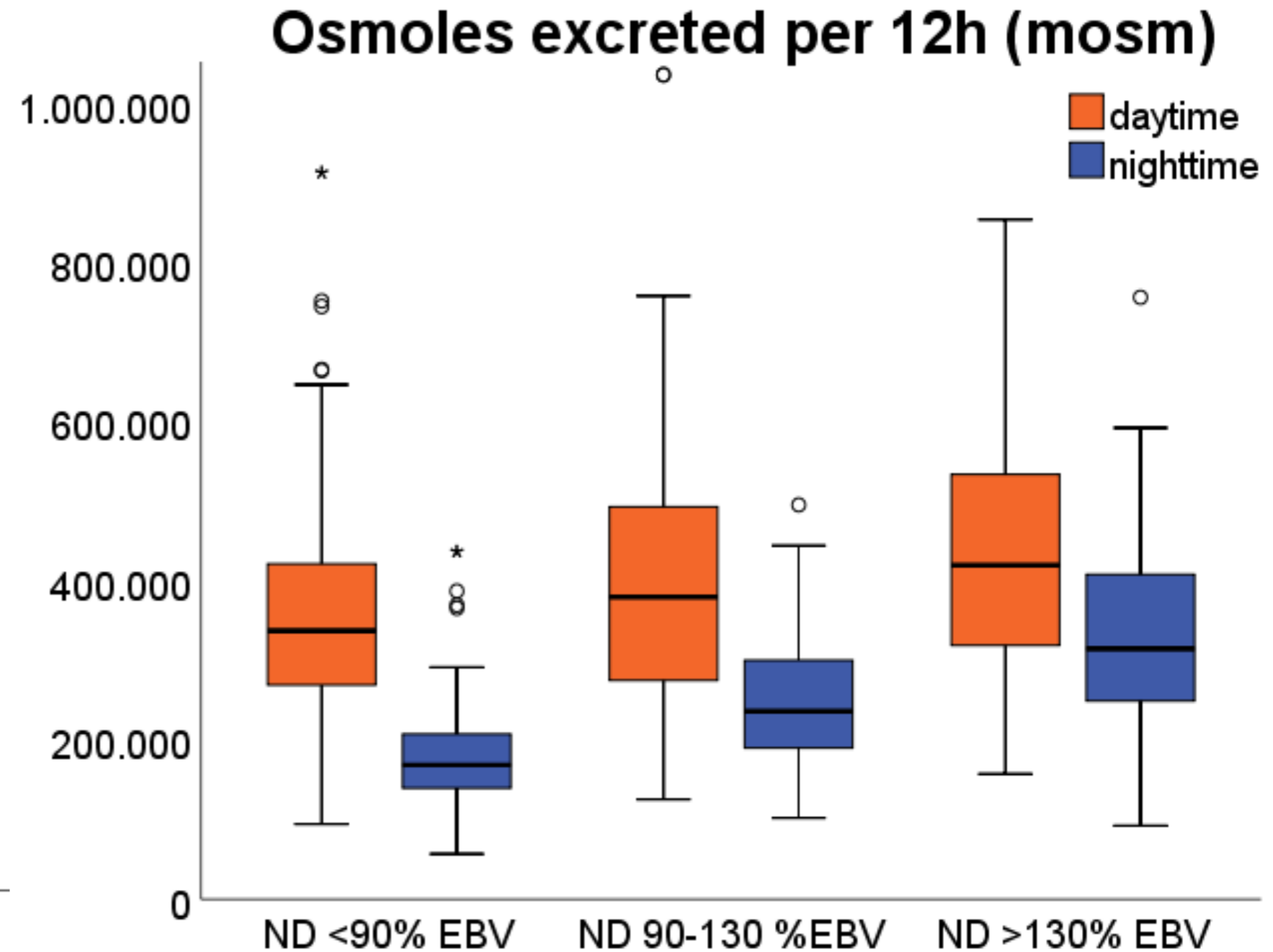
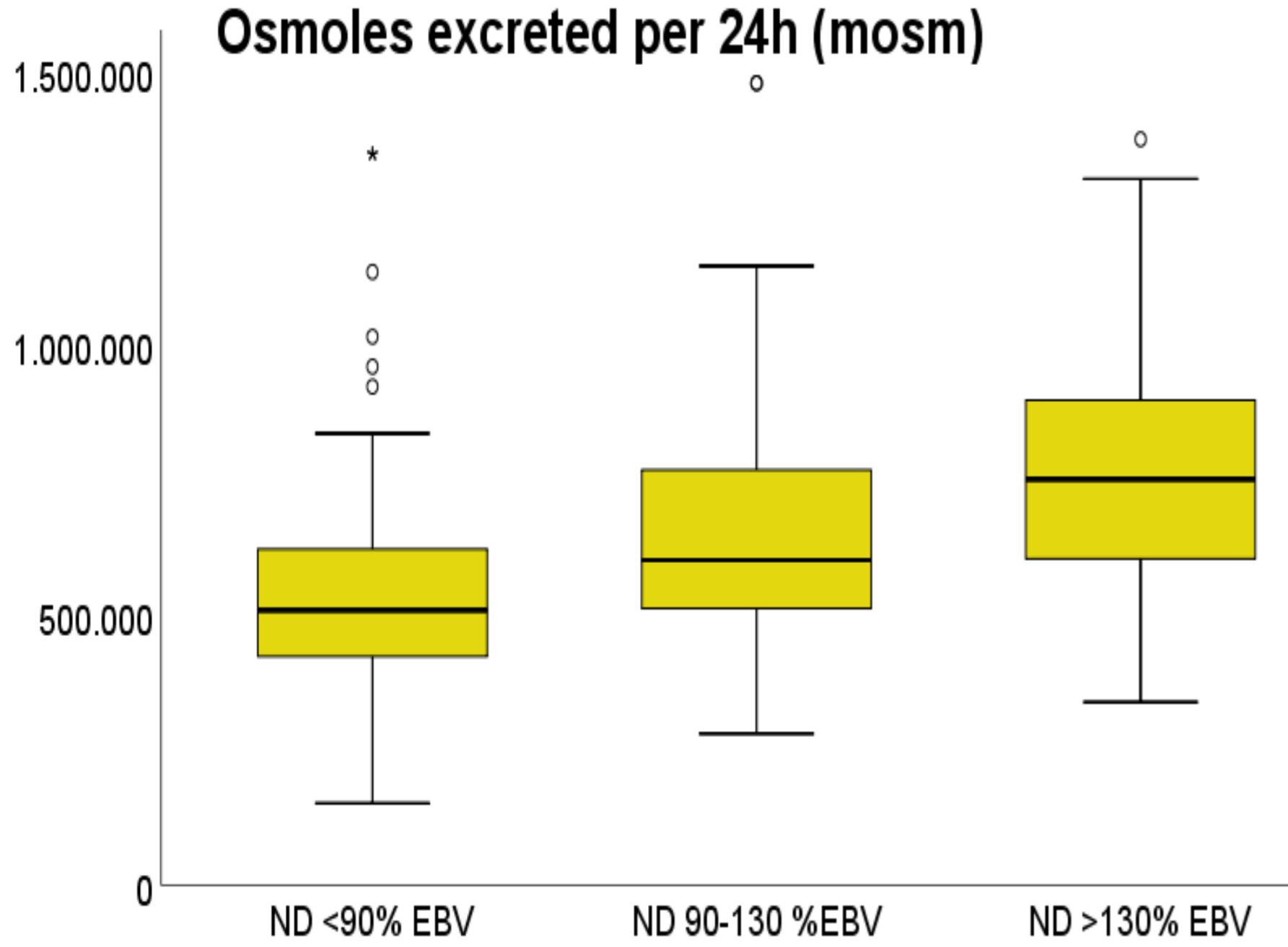
RESULTS



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CONCLUSIONS

- **Nocturnal Polyuria** is defined by the ICCS as $>130\%$ of EBC
 - Desmopressin **response** might be expected
 - in any nocturnal diuresis with **low osmolality** overnight
 - in MNE and NMNE when nocturnal diuresis rate is **$>100\%$ EBC**
- Overall pathogenesis of high diuresis rate overnight is not only AVP but also **solute related**
- In the majority of patients the increased water and solute diuresis is present in the **first two night collections**
 - treatment should target **fast** rather than long term action.