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Desmopresin Secondary Developing Pulmonary Edema

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A 78-year-old female patient was admitted to our clinic with complaints of dyspnea that started 1 week ago and progressed. She had been on inhaler treatment for 10 years with the diagnosis of asthma. She had been diagnosed with pulmonary embolism after a long hospitalization and had a history of anticoagulant use for 6 months 2 years ago. She was dyspneic. On her physical examination, expiration was prolonged and crackles in the basals were auscultated. The arterial blood gas pH: 7.48, pO₂: 48mmHg, pCO₂: 30mmHg, sO₂: 83%. Chest X-ray revealed bilateral hilar regions. There was an increase in opacity in both middle and lower lungs. With physical examination of the patient, this appearance was compatible with lung edema. Her biochemical values and inflammation markers were normal. The patient was hospitalized for the treatment of pulmonary edema, asthma attack and respiratory failure. Pulmonary CT angiography was performed to evaluate emboli recurrence. There was no thrombus in the pulmonary arteries. She was consulted with cardiology for heart failure. On echocardiography, EF: 60% and PAB: 32+5 mmHg, respectively. The patient was followed up with diuretic treatment and bronchodilator treatment, and clinical improvement was observed. It was learned that the patient used desmopressin 0.2 mg/day due to urinary incontinence for 3 weeks when her history was deepened. Desmopressin was discontinued because it might be associated with lung edema. Clinical and radiological improvement was observed after 2 days of medical treatment. Pulmonary edema findings regressed in the control chest radiograph. The patient was discharged with bronchodilator therapy and oral diuretic therapy. Pulmonary edema was not observed in the follow-up. Similar to our case, there were 2 cases of pulmonary edema after desmopressin use. In addition to other etiologic factors in patients presenting with pulmonary edema, questioning the use of desmopressin may benefit the treatment planning.

Keywords: Desmopressin, dyspnea, pulmonary edema