

Polyuria and/or polydipsia

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Rationale

Although not common, polyuria and/or polydipsia may be the presenting symptom(s) of a potentially serious underlying condition. It may be confused with urinary frequency, a common complaint.

Causal Conditions

(list not exhaustive)

- Water diuresis
 - a. Excessive intake
 - b. Excessive loss - diabetes insipidus
- Osmotic diuresis
 - a. Sugar - diabetes mellitus
 - b. Urea - chronic renal disease
 - c. Salts - organic anions

Key Objectives

Given a patient who presents with polyuria and/or polydipsia, the candidate will diagnose the cause, severity, and complications, and will initiate an appropriate management plan.

Enabling objectives

Given a patient with polyuria and/or polydipsia, the candidate will

- list and interpret critical clinical findings, including

- a. diagnose polyuria/polydipsia, causal factors, and severity, differentiating urinary frequency from polyuria;
- b. inquire about any personal or family history of diabetes;
- c. identify neurological features that may suggest intracranial pathology as a cause of central diabetes insipidus;
- list and interpret critical investigations, including
 - a. tests which distinguish between water and osmotic diuresis;
 - b. screening for diabetes;
 - c. use of a voiding diary, when appropriate;
- construct an effective initial management plan, including
 - a. management of the underlying cause;
 - b. determination as to whether the patient requires specialized care.