

# Instructions for Patients: DDAVP.

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**DDAVP** (1-desamino-8-D-arginine-vasopressin) is a synthetic hormone. It tells the kidneys to **slow down urine production**. It is used to decrease bedwetting. It was available as a nasal spray and in tablet form. It works for 4 to 8 hours (or more) while you sleep. DDAVP does not cure bedwetting; it only **works on the nights it is used**. It works in 70-85% of children using it for bedwetting. Many children using DDAVP will not have any bedwetting while using it. Others will have about half the wet nights they would have without it. This medicine is quite expensive, and it is not unusual for insurance companies to have some restrictions about covering DDAVP's use. Some insurance plans require that a bed-wetting alarm be used to decrease (or stop entirely) bed-wetting before they will cover the DDAVP medication. The following tips are intended to allow the use of the lowest dose possible for success.

1. The latest DDAVP nose spray and the tablets do not need refrigeration. They are to be stored at room temperature. The original DDAVP nose spray needed to be refrigerated and warmed to room temperature before use.
2. Take 30 minutes before bedtime. Do not lie down immediately after using DDAVP.
3. Keep to a minimum any fluid intake 2 hours before and 8 hours after using DDAVP. Drink just enough to satisfy thirst. Avoid caffeine-containing beverages because caffeine makes bed-wetting more likely.
4. Empty the bladder just before bedtime.
5. DDAVP can be given with any over-the-counter medicine for fever, pain, cold, or cough. It also can be given at the same time as antibiotics. Note, however, that any medication that would make a child more drowsy -- in a child already prone to bed-wetting -- could make it more likely that they would bed-wet that night.
6. DDAVP is unlikely to cause side effects. The most common side effect is headache, but this usually only occurs in 1 in 25 children taking DDAVP. Other less common side effects were nausea (upset stomach), flushing, and mild abdominal cramps. If side effects were to occur, you would notice them within the first 1-2 weeks using the medicine. If they are mild, try continuing the medicine a little while longer as the side effects are likely to go away.
7. DDAVP should work as well whether you take it every night or just on occasion (for sleep-overs, camping, vacations, etc.).
8. If it is working well, DDAVP can be safely continued for months and years.

## Instructions for use of the nasal spray:

- Blow the nose before administration to clear the nose of mucus.
- Make sure that the dip tube is in the deepest portion of the medicine, under the level of the liquid.
- The medication may not work well if used when you have a cold or congestion. DDAVP can be omitted on those nights (or used with the understanding that the DDAVP may not help as much that night).
- Tilt the head back slightly to avoid having the medication dripping out of the nostrils or running down the back of the throat.
- Insert the nasal spray tip into the nostril approximately 1/4 of an inch.
- Breathe in normally during administration. Do not "sniff" the medicine into the nose.
- When using a bottle for the first time, prime the pump by pressing down 4 times.
- Re-prime the bottle by pressing once if the bottle has not been used for a week or more.

- The starting dose is one squirt into each nostril (a total of 2 squirts) 30 minutes before bedtime for two weeks. If after the first two weeks the number of wet nights is not at least cut in half, increase to 2 squirts into each nostril. If this is not successful after two weeks, DDAVP should be stopped. If you call our office during routine office hours, we can suggest other treatment options.
- If two squirts per night are successful, stay on this dose for 4 to 8 weeks. Then wean down to just one squirt (one squirt into just one nostril each night).
- Once a successful dose is reached, maintain that dose for 2 to 6 months, then gradually wean down (over a month) to one squirt per night. After 2 to 6 months on one squirt per night, start skipping every other day for a month, gradually discontinuing the medicine completely.

**Instructions for use of the tablets:**

- The tablets can be swallowed whole, chewed, or dissolved in a small amount of liquid and drank. They will actually dissolve in the mouth after 20-30 seconds if not swallowed right away. They are essentially tasteless.
- The usual starting dose of DDAVP 0.2 mg tablets is two tablets for anyone 6 years of age and older. If you are switching from the nose spray to the tablet, start with this dose regardless of your nasal spray dose.
- If you are dry every night (or nearly every night) you have taken two tablets, you may try taking just one tablet before bedtime.
- If after the first two weeks of taking two tablets each night the number of wet nights has not been at least cut in half, increase the dose to three tablets each night (the maximum recommended dose per night is three tablets). If after two weeks of three tablets each night the number of wet nights has not at least been cut in half, consider stopping the DDAVP tablets. If you call our office during regular office hours, we can discuss other treatment options.
- You may continue for months and years taking the dose that works for you.
- After a few months of being dry at a particular dose, you may want to wean off the medicine. If so, try taking one less tablet each night for two weeks until you have weaned to one tablet each night. Then try taking the medicine every other day for a month and then stop the DDAVP entirely.

Call during routine office hours if you have questions about DDAVP.

Two web sites have good information available about bed-wetting and DDAVP:

<http://bedwettingstore.com> for the Bed Wetting Store

<http://www.healthychildren.org> for the Healthy Children's page on Bed-wetting.

-- Tim Teller, M.D. -- Hilliard Pediatrics, Inc. – 6-13