

A Short Note on Polydipsia

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Editorial Note

Polydipsia is inordinate thirst or redundant drinking. The word derives from the Greek πολυδίψιος (poludípsios) "veritably thirsty", which is deduced from πολύς (polús, "much, numerous") δίψα (dípsa, "thirst"). Polydipsia is a nonspecific symptom in colorful medical diseases. It also occurs as an abnormal geste in some non-human creatures, similar as in catcalls.

It can also be caused by a change in the osmolality of the extracellular fluids of the body, hypokalemia, dropped blood volume (as occurs during major hemorrhage), and other conditions that produce a water deficiency. This is generally a result of bibulous diuresis.

Primary polydipsia describes inordinate thirst and water input caused in the absence of physiological stimulants to drink. This includes both psychogenic primary polydipsia and non-psychogenic primary polydipsia, similar as in cases with autoimmune habitual hepatitis with oppressively elevated globulin situations.

Psychogenic polydipsia is an inordinate water input seen in some cases with internal ails similar as schizophrenia, and/ or the developmentally impaired. It should be taken veritably seriously, as the quantum of water ingested exceeds the quantum that can be excreted

by the feathers, and can on rare occasions be life-changing as the body's serum sodium position is adulterated to an extent that seizures and cardiac arrest can do.

While psychogenic polydipsia is generally not plant outside the population of serious internal diseases, there's some anecdotal substantiation of a milder form (generally called 'habit polydipsia' or 'habit drinking') that can be plant in the absence of psychosis or other internal conditions. The inordinate situations of fluid input may affect in a false opinion of diabetes insipidus, since the habitual ingestion of inordinate water can produce individual results that nearly mimic those of mild diabetes insipidus. As banded in the entry on diabetes insipidus, "Habit drinking (in its severest form nominated psychogenic polydipsia) is the most common imitator of diabetes insipidus at all periods. While numerous adult cases in the medical literature are associated with internal diseases, utmost cases with habit polydipsia have no other sensible complaint. The distinction is made during the water privation test, as some degree of urinary attention above osmolar is generally attained before the case becomes dehydrated." Still, previous to a water privation test, consideration should be given to a psychiatric consult to see whether it's possible to rule out psychogenic polydipsia or habit polydipsia.

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