Q3)

How to manage rapid diuresis when loading fluid in young patients undergoing hyperdynamic therapy for vasospasm (secondary to aneurysmal subarachnoid haemorrhage)?

Parenenteral desmopressin (1-4 microgram) or fludrocortisone (0.1-0.2 mg/day)

Ref.: Godsiff LS, Matta BF. Intensive care management of intracranial haemorrhage. In Textbook of neuroanaesthesia and neurocritical care. Ed.: Basil Matta, David Mannon, John Turner. GMM, London 2000, page 337

Aside: The original report on the use of hydrocortisone to reduce vasopressor requirements during hyperdynamic therapy can be found at:

http://bja.oxfordjournals.org/cgi/content/full/86/1/138?ck=nck