

STUDY OF ACUTE KIDNEY INJURY IN PATIENTS ADMITTED IN INTENSIVE CARE UNIT IN TERTIARY CARE HOSPITAL

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ABSTRACT

The Acute kidney injury (AKI) in particular occurring in ICU and is recognised as a major public health problem worldwide affecting millions of patients leading to decreased survival. AKI complicates 5–7% of acute care hospital admissions and up to 30% of admissions to the intensive care unit. AKI is a common complication of ICU and also associated with a markedly increased risk of death in hospitalized individuals, particularly in those admitted to the ICU where in-hospital mortality rates may exceed 50% when Compared to western literature, reports from our country are limited and hence there is a need to understand the clinical profile of these patients here. A thorough understanding of clinical spectrum of disease is needed in order to devise methods to improve final outcome due to AKI in ICU admitted cases. The present study aims to know the clinical spectrum of AKI in patients admitted in intensive care unit and to determine the risk, prognostic factors and final outcome of AKI patients who are admitted in intensive care unit tertiary care hospitals in Bangalore city. A total 100 patients of AKI patients admitted in ICU were considered for the study. The data was collected through a pretested proforma, which included various like patients history, Clinical examination, Diagnosis, Laboratory parameters, Urine output, Comorbid conditions, dialysis, MSOF etc., The Patients were followed up till the event of discharge or death in hospital. The main outcome evaluated was mortality. As per the analysis present study demonstrates majority of patients were in 51 to 60 years age group (24%) with highest mortality in 51 to 60 age group (32.1%). Fever was the most common presentation of patients (46%); Sepsis was the most common diagnosis (59%). Oliguric renal failure was seen in 49% cases. Comorbidity was seen in 51% of the patients; hypertension (30 cases), diabetes mellitus (23 cases), COPD (11 cases) and IHD (7 cases). A high overall mortality of 56% was seen which is consistent with other studies done in various parts of the world. Intrinsic type of renal failure was the most common type (68%). MSOF was noted in 63% of the patients. 37% of the patients required ventilator support and 45 % patients required dialysis. Mortality increased in older age group, comorbid conditions, oliguric renal failure. Sepsis was the most common cause. Intrinsic type of renal failure was the most common type of AKI seen. There was an increased mortality seen in patients who required dialysis, and mechanical ventilation. Presence of MSOF was associated with poor prognosis.

KEYWORDS: Acute Kidney Injury, Sepsis, Liguria, Multiple Systems Organ Failure