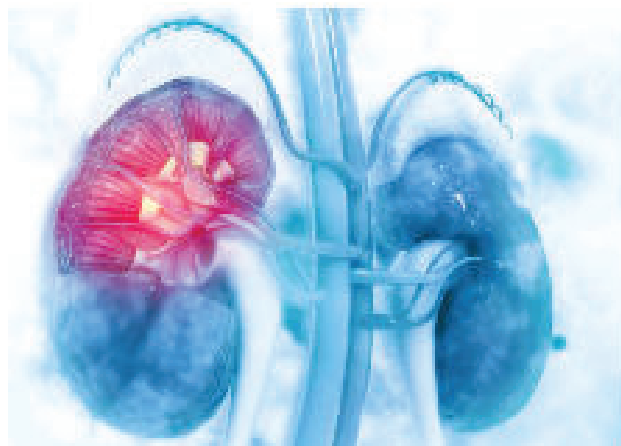


## Preventing AKI's



RUN BY PATIENTS FOR THE BENEFIT OF PATIENTS



HELPLINE **0800 169 09 36**

[www.kidney.org.uk](http://www.kidney.org.uk)

Have you had an Acute Kidney Injury (AKI) as an inpatient or an outpatient and wish to know more about how this could be prevented in the future?

It is estimated that 65% of Acute Kidney Injuries start in the community (Selby 2012). This information aims to provide insight into what can cause an AKI, symptoms and prevention.

The term 'AKI' can sound scary indicating you have had an injury to your kidneys; however, this is not the case. It means that your kidney function has deteriorated, and this can happen quickly but usually recovers within a few days or weeks. It does not mean they have taken a physical hit.

An AKI can happen to anyone, but there are some people that have added risk factors for getting an AKI. These risk factors are: -

- Being over 65 years old
- Having Chronic Kidney Disease (CKD)
- Had a previous AKI
- Not being able to drink enough
- Sepsis
- Long term conditions such as diabetes, heart failure and liver disease
- Taking certain medications that involve your kidneys

These include

- Non-steroidal anti-inflammatory drugs known as NSAIDs such as ibuprofen, naproxen used for pain.
- Medications for blood pressure and your heart known as Angiotensin-converting enzyme inhibitors (ACEi) which usually end 'ril'. Or Angiotensin receptor blocks (ARBs) which usually end in 'sartan'.
- Diuretics, which are water tablets to get rid of excess fluid such as furosemide, bumetanide, spironolactone.
- Some antibiotics (ciprofloxacin, vancomycin, flucloxacillin)
- Diabetic medication called metformin

These risk factors will mean that you could be more susceptible to getting an AKI but it can happen to anyone. AKI is usually caused by stress on the kidneys due to something happening in the body.

These are some examples of things that could cause an AKI:-

- Dehydration (from reduced intake, diarrhoea, vomiting)
- Sepsis (infections)
- Urinary retention (being unable to pass urine due to blockages)
- Low blood pressure (which causes reduced blood flow to the kidneys)

You may ask what are the symptoms of these causes and what should I be looking for? Some of the symptoms are non-specific, but if you were experiencing any of these symptoms and have risk factors then you should seek medical attention within 24 hours of the onset of symptoms. This would mean seeing your GP first. If it was out of hours such as a weekend, then you should call 111 for a review. If you are experiencing central crushing chest pain or have life threatening symptoms, then dial 999.

Potential symptoms of an AKI to look out for could include: -

- Diarrhoea
- Nausea or vomiting
- Reduced oral intake resulting in dehydration
- Passing little or no urine at all
- Very dark concentrated urine without explanation (i.e. on medications that cause urine to change colour)
- Confusion
- Swelling/ extra fluid accumulating in the body such as feet or ankles which does not improve with elevation.
- Feeling generally unwell but can not put your finger on what is causing it. This can sometimes be your kidneys not working so well and making you feel unwell.

Some of these symptoms are non-specific and could be caused by other things but it is always best to have these assessed to avoid an AKI, prevent it from worsening and avoid a hospital admission.

There are several things you can do to help to prevent an AKI from occurring or getting worse. These are: -

- Ensure you are well hydrated aiming to drink 1.5-2 litres of water a day (unless you are on a fluid restriction which has been advised by a medical clinician)
- If you are on any of the medications listed as a risk factor and you are unwell with vomiting, diarrhoea, fevers, sweats and shaking, then you should follow 'sick day rules' and STOP taking these medications until you are well and have been eating and drinking for 24-48hours. If you are unsure whether to stop or restart these or have stopped taking these for more than 48hours you should contact your local pharmacy or GP for advice.
- If you are under the care of the Heart Failure team and become acutely unwell you should contact them for advice regarding medication changes.
- If you have diarrhoea or vomiting and unable to take on fluid see your GP for advice.
- Increase your fluid intake if you have an infection with a temperature.
- On hot days you should slightly increase your fluid intake by one extra glass of water.
- If you have had an AKI, ensure you have had repeat bloods to ensure your kidney function has improved.

Written by

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*The National Kidney Federation cannot accept responsibility for information provided. The above is for guidance only. Patients are advised to seek further information from their own doctor.*

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