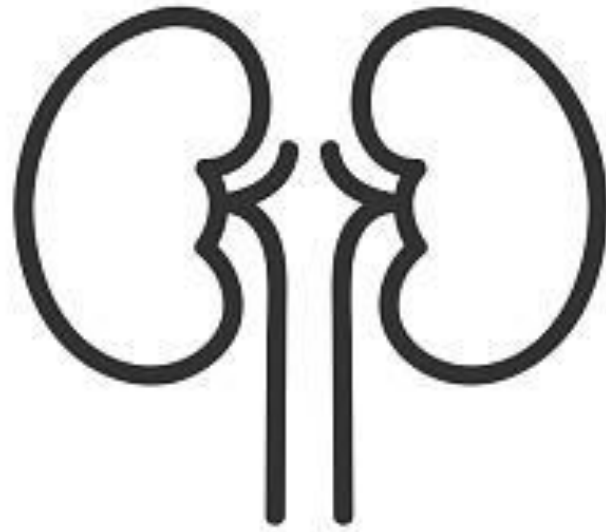


Acute Kidney Injury In Children



Emergency Management

Acute Kidney Injury

- Acute decrease in glomerular filtration rate, which results in an increase in serum creatinine
- Increase in serum creatinine by $\geq 0.3\text{mg/dl}$ within 48 hours
- Increase in serum creatinine by ≥ 1.5 times baseline
- Urine volume $< 0.5\text{ml/kg/hr}$ for 6 hours

Management

A- Airway

➔ B- Breathing

➔ C- Circulation

➔ D- Disability

➔ E-Exposure

Assessing Kidney Injury and Fluid Balance

Intrinsic Injury

Vascular spasm, intravascular coagulation
and microvascular injury
Excess Total Body Fluid

Prerenal Injury

Decreased renal perfusion
Hypovolemic



Management

- Fluid resuscitation if indicated
- Correct electrolyte imbalances
 - Metabolic acidosis
 - Hyperkalemia
 - Hyperphosphatemia and hypocalcemia
- Dialysis may be indicated
 - Refractory hyperkalemia
 - Volume overload
 - Intractable acidosis
 - Uremic encephalopathy
 - Pericarditis or pleuritis
 - Removal of certain toxins

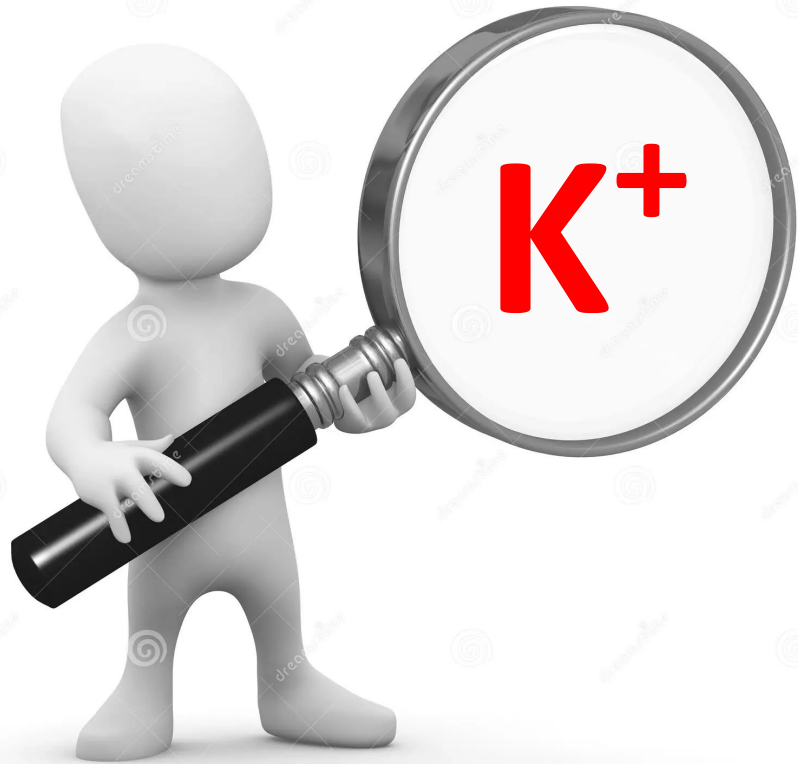


Fluid Selection

- Choose normal saline for boluses
 - Ringer's lactate contains 4mEq of potassium per liter
- Crystalloid solutions can be considered
- D5 is preferred over D10 for treatment of hypoglycemia
- If blood is needed
 - Packed cells
 - Over slower period of time



Management of Hyperkalemia



- C- Calcium gluconate
- B- Beta-2 agonist and Bicarbonate
- I- Insulin
- G- Glucose
- K- Kayexlate (sodium polystyrene)

Medications to Avoid

- Aminoglycosides
- Amphotericin
- NSAIDs
- Contrast

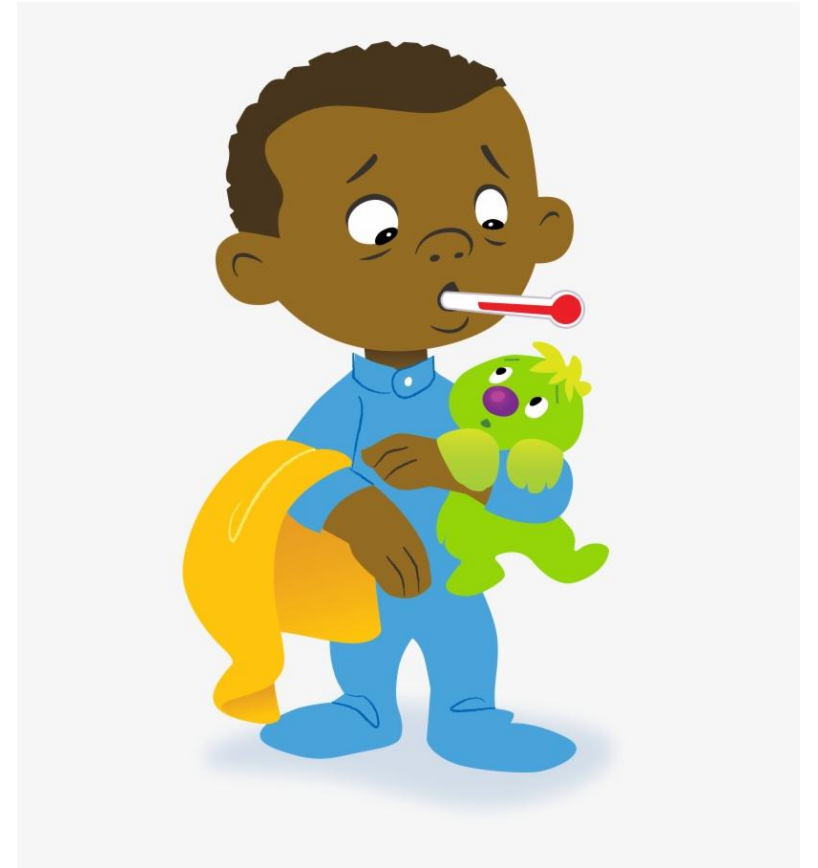


? To Challenge Or Not To Challenge ?

- No clear guidance on use of furosemide or mannitol in AKI
- Use does not change the need for renal replacement therapies
- Potential physiologic benefits in intrinsic renal injury
- Should NOT be attempted unless intravascular fluid status is restored

Continuing Care

- Treatment of underlying illness
- Maintain fluid balance
- Close monitoring of urine output
 - Goal $>1\text{ml/kg/hour}$
- Monitor blood pressure
- Adequate nutrition
- Follow up care



References

- KDIGO Clinical Practice Guideline for Acute Kidney Injury (2012). International Society of Nephrology. Vol 2(1).
<https://kdigo.org/guidelines/acute-kidney-injury/>
- Gregory, M.J. (2007). “Acute Renal Failure”. Comprehensive Hospital Medicine. Elsevier. pp:687-701.
- Selewski, D.T. and Symons, J.M. (2014). Acute Kidney Injury. Pediatrics in Review. 35(1) pp30-44.

THANK YOU!