

## Patient information

# Acute Kidney Injury (AKI)

## What is Acute Kidney Injury?

Acute Kidney Injury (AKI) occurs when the kidneys suddenly stop working properly.

To assess kidney function a blood sample is taken to measure a waste product in the blood called creatinine. Your urine output may also be assessed.

AKI causes a build-up of waste products in your blood and the kidneys are unable to maintain the correct balance of fluid in the body.

## What do your kidneys do?

Remove extra  
water

Cleans the  
blood

Control blood  
pressure



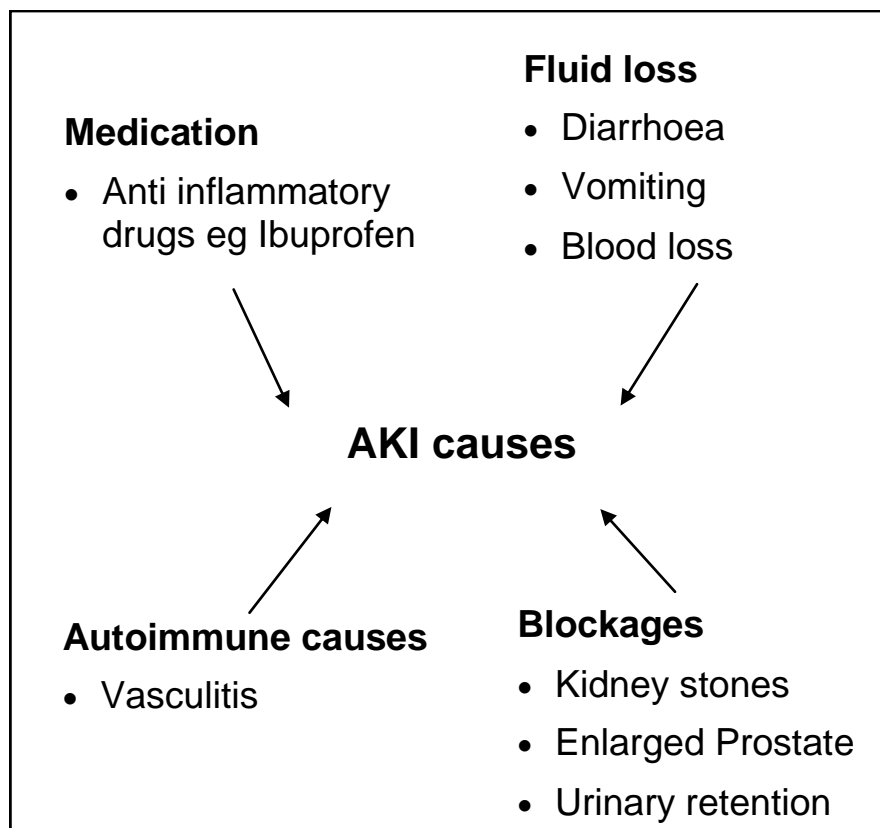
Keep your body  
chemicals in balance

Help build red  
blood cells

Promote bone  
health

## What are the symptoms of AKI?

- You may pass less urine
- The colour of your urine may change
- Swelling of the feet, legs and around the eyes
- Tiredness
- Confusion
- Nausea
- Shortness of breath



## AKI Stages

The severity of AKI is described by stages. Stage 1 is less severe and stage 3 the most severe.

## How will AKI be treated?

This depends on how it was caused. Treating the cause is key.

- If fluid loss or dehydration, it may require oral or intravenous fluid. Strict fluid balance monitoring is often required.
- Temporary dialysis may be required.
- Medicines to control the amounts of toxins and minerals in your blood.
- Change in medication; either because they have caused the AKI, exacerbate the AKI or the risk of side effects is heightened with AKI

### **What investigations do I need?**

- Blood tests (usually daily in hospital)
- Urine sample
- Ultrasound of kidneys, bladder and urinary tract
- May require chest x-ray
- May require CT scan
- May require kidney biopsy

### **What happens if I'm discharged from hospital?**

A follow up appointment will be required with your GP or nephrologist to assess the recovery of kidney function, usually with blood tests in 2 - 3 weeks.

### **What should I do to prevent it happening again?**

As AKI happens suddenly, it can be hard to prevent. To keep your kidneys healthy:

- If diabetic, ensure good blood sugar control
- Manage high blood pressure to targets set by your doctor
- Healthy diet

- Regular exercise
- To avoid over the counter anti-inflammatory medicines if possible (eg ibuprofen)
- Sick day guidance: if you take medications such as ACE inhibitors/ARB to lower blood pressure (eg. drugs ending in -pril / -sartan or water tablets), consider withholding these if you become dehydrated for 2 - 3 days and restarting when you feel better
- Avoid dehydration
- Inform your doctor if you have had AKI in the past

## Our staff

Dr H P Chong (Consultant Nephrologist)

Dr W Petchey (Consultant Nephrologist)

Dr V Yiu (Consultant Nephrologist)

Annika Wallis (Renal Nurse Specialist)

Laura Riley (Renal Dietitian)

The department can be contacted via the secretaries on 01284 713148

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email [info.gov@wsh.nsh.uk](mailto:info.gov@wsh.nsh.uk). This will in no way affect the care or treatment you receive.

*If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)*  
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



© West Suffolk NHS Foundation Trust