



The Dudley Group
NHS Foundation Trust

Acute Kidney Injury (AKI)

Renal Unit

Patient Information Leaflet

What is AKI?

AKI is short for Acute Kidney Injury. Once called acute renal failure. If you have AKI, it means your kidneys have suddenly stopped working as well as they were before. This may have happened in the last few hours, days or weeks.

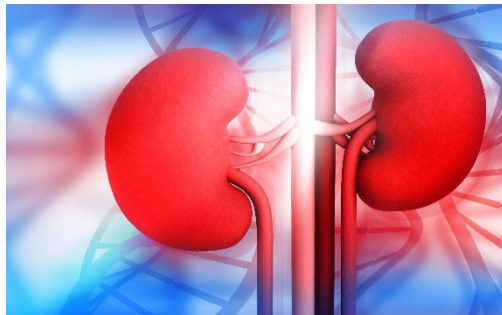
AKI affects both you kidneys.

AKI is often seen in older people who are unwell and have been admitted to hospital, but it can happen at any age in your life. If not diagnosed in time the Kidneys can become overwhelmed and shut down. This can lead to irreversible injury and can be life threatening if not detected early enough and treated quickly.

It is essential that AKI is detected early and treated quickly.

What Causes AKI?

AKI is common and normally happened as a complication of another serious illness. It's not the result of a physical blow to your kidneys. AKI might be caused by stress on your kidneys due to infection, severe dehydration or by some medicines, especially if you take them whilst you are unwell, for example when you have diarrhoea or sickness.



What should my kidneys be doing if they are working properly?

Your kidneys have lots of very important jobs to do to keep you well. Your kidneys do the following:

- Clean your blood
- Get rid of waste
- Keeps the right amount of chemicals in your blood, for example potassium.
- Help to keep the right amount of fluid in your body and help make urine.

Your Kidneys also have other jobs such as helping to make red blood cells, keeping acid levels right in your body and helping to keep your bones healthy and control your blood pressure.

What are the symptoms of AKI?

Some patients do not have any signs that their Kidneys are not working well.

We find out about your kidney injury by looking at your blood test results.

Some patients might have signs that their kidneys have stopped working how they should:

You might not be passing as much urine when you go to the toilet, even if you drink more fluids.

Some people suddenly can't make any urine at all.

You might have very concentrated urine.

Urine can look yellow/brown/red in colour.

Your feet and legs might swell up, especially if you have been standing or sitting for a while.

If your kidney injury doesn't get better quickly and the waste products build up in your body, you may start to feel very sick, tired, and drowsy, confused or even have itchy skin.

What happens next?

You will need to have some extra blood tests. This will help us to see if your kidneys function is getting better or deteriorating. We will also need to look at a small sample of your urine.

Some patients might need to have a bladder catheter to help them pass urine which will also help us to monitor you.

You might also need to have a special scan of your kidneys using an ultrasound machine. This will not be painful it will help the doctors to measure your kidneys.

What will happen to you after the first tests and investigations?

Usually you will still be cared for by the medical or surgical doctors on the ward until discharged from hospital. Some patients need to see a specialist team of urologists. The urologists will see you if you need an operation to help release the urine from the bladder.

Patients with very rare but serious Kidney injury may need to be seen by specialist kidney doctors. They may take over your care and move you to the specialist ward.

In some cases your kidneys may not make a good recovery quickly enough. You may need to have dialysis to clean your blood and help remove excess waste products, this is very rare.

There are a small number of patients whose kidneys will never recover from AKI, if this does happen the kidney doctors will take to you about all your options.

What about my medicines?

Your prescription will be reviewed by the pharmacist and doctor. They might stop some of your medications altogether or suggest that you stop some for a while until your kidneys recover.

There are some medicines we will advise you to stop if you are unwell and become dehydrated. This is called "sick day guidance". We will give you some extra information about this if you are taking these medicines or ask your pharmacist.

What happens once I leave hospital?

We will write to your GP to tell them that you have had an acute kidney injury.

We recommend that you avoid any medicines that can cause damage to your kidneys. Please check with your doctor, nurse or pharmacists before taking any new medication.



Long Term Care

You will need to look after your kidneys forever because there is a risk that this may return again and your kidneys could be affected in the long term.

You should tell all health care professionals treating you that you have had an AKI.

Can I do anything to help myself?

We suggest that you follow healthy eating and lifestyle advice.

Try and keep your blood pressure under control.

Questions

Please let us know if you would like any more information regarding AKI, should you have any questions or concerns please ask.

Useful Contact details

Haemodialysis Unit Russells Hall Hospital – 01384 244384

Further information

<https://dudleykidneypa.org/>

[Kidney Care UK](#)

