

Acute Kidney Injury (AKI)

Patient/carer information leaflet

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633

You have been given this information leaflet because you or someone you care for has/ had an Acute Kidney Injury (AKI).

This information leaflet will explain what AKI is, what can be done whilst in hospital and how you can prevent an AKI.

What is AKI?

AKI is a sudden drop in kidney function, which means that your kidneys do not work as well as they should. This can range from a small loss of function to complete failure.

AKI normally happens, as a complication of another condition.

AKI does not mean that you have hurt your kidneys, in the same way that you can hurt other parts of your body e.g. by falling over or getting hit.

In AKI, your kidneys temporarily do not work as well as they should, but usually gets better without any long-term problems. However, it is important to detect it early and treat promptly.

AKI is different to Chronic Kidney Disease (CKD) which does not get better, but can be slowed or managed with treatment.

Other sources of information and support

There are a number of organisations that provide support and advice for people and their families with acute kidney injury.

NHS Choices

<https://www.nhs.uk/conditions/acute-kidney-injury>

Think Kidneys

<https://www.thinkkidneys.nhs.uk/aki/information-for-the-public>

Kidney Care UK

<https://www.kidneycareuk.org>

The National Kidney Federation

<https://kidney.org.uk>

Kidney Research UK

<https://www.kidneyresearchuk.org>

Kidney Dialysis Information Centre

<http://www.kidneydialysis.org.uk>

If you become unwell you should:

1. Drink enough fluid to make sure that you have enough fluid in your body.

This is likely to be at least 8 cups of fluid a day (one cup = 200mls), unless you have other instructions from your doctor. Water is one of the healthiest choices to keep your kidneys working effectively. Water does not contain sugar which can damage teeth.

If you are vomiting. Take small sips of water/fluid frequently, until your symptoms have settled.

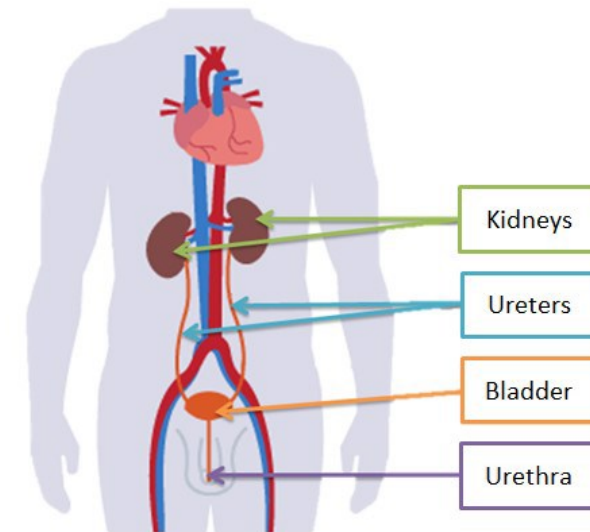
2. Avoid drinking alcoholic drinks when you are unwell, as alcohol can contribute to dehydration.

3. Speak to your GP or specialist team if you have passed much less urine than you normally do OR if you are unable to keep fluids down and/or have continuing diarrhoea or vomiting.

4. Inform your pharmacist regarding previous AKI when obtaining any medications, including those that do not require a prescription.

Where are my kidneys?

- Your kidneys are small, fist-sized organs, shaped like beans.
- They are in the middle of your back, one on each side
- Most people have two kidneys but you may be born with only one.



What do my kidneys do?

- Clean your blood
- Control your blood pressure
- Keep the right amount of fluid in your body
- Make red blood cells
- Control the minerals in your body, like potassium and phosphate.



How can I prevent AKI?

AKI is often preventable. Knowing your risk factors for AKI and raising awareness of AKI can prevent some cases happening.

Patients in hospital should have blood tests carried out during their admission and some may need to have their urine volume measured.

Medications which are prescribed for you may be reviewed by a doctor or pharmacist, to reduce risks which are associated with some medications, when you have an AKI.

Some people having scans that involve needing a dye, should have their kidney function checked and medication reviewed to reduce risk of AKI after their scan.

What will happen after an AKI?

The recovery period after an AKI will depend on how bad the kidney function became and what initially caused the AKI.

Most people who recover from an AKI, return to their normal kidney function afterwards and do not need any long term treatment.

Some people however, may go on to develop chronic kidney disease and even fewer may need to continue to have dialysis.

If you have had an AKI once, you are at an increased risk of developing AKI again in the future.

You will be referred to our post-AKI clinics, or you will be monitored by your GP. Who will check your blood and urine on a follow up appointment and monitor your blood pressure.

Who is at risk of AKI?

We are all at risk of AKI. It is very common when people become seriously unwell, it affects 1 in 5 people admitted as an emergency to hospital.

AKI can be caused by individual factors, or a combination of factors.

You are more likely to develop an AKI in these situations:

- Chronic kidney disease
- Having an illness like diabetes, heart failure or liver disease
- Some medication (e.g. anti-inflammatory medications, blood pressure medications and diuretics, also called 'water tablets')
- Being dehydrated
- Having had an AKI in the past
- Being frail or elderly; in particular patients with dementia.

What can cause AKI?



AN INFECTION



A REACTION TO
MEDICATION



LOW BLOOD
PRESSURE



DEHYDRATION



KIDNEY STONES

What are the symptoms?

You may not have any symptoms of AKI. It may be found after a blood test.

Or you may have symptoms that your kidneys are not working properly, such as:

- You wee less
- The colour of your wee may change
- You feel ill, tired or confused
- Your legs or feet might swell up
- You feel very thirsty
- Your blood pressure may change.

What happens if I am diagnosed with AKI?

It is important you are treated early. You will need to have some blood tests and give a sample of your wee.

You may also:

- Have a soft plastic tube called a catheter, put into your bladder to drain it
- Have a scan of your kidneys called an ultrasound
- See a specialist kidney doctor.

There isn't a specific treatment for AKI. The treatment is usually dependent on what has caused the AKI in the first place.

However, in serious cases, you may need to have dialysis. This is a treatment for severe kidney disease and uses a machine to remove the waste products and excess fluid, that build up in your body when your kidneys stop working.

Most people with AKI only need to have dialysis for a few days or weeks, until their kidneys start working again.