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Jaiju James Chakola

Sri Ramachandra Institute of
Higher Education and Research Centre, India

Prevalence and outcome of acute kidney injury in dengue patients in a tertiary care hospital, India

Dengue is a growing public health problem and AKI is one of the major complications of dengue virus infection. A total of 922 dengue patients (2017–2018) were retrospectively evaluated and were stratified into AKI and non-AKI groups. Two groups were compared using appropriate statistical methods. There were 103 patients (11.2%) who had AKI, with AKIN-I, II and III in 68.8%, 23.6% and 7.6% patients, respectively. Significant differences ($P < 0.05$) in demographics and clinic-laboratory characteristics were observed between patients with and without AKI. Presence of DHF [OR (95% CI): 8.0 (3.64–17.59), $P < 0.001$], rhabdomyolysis [OR (95% CI): 7.9 (3.04–20.49)], MODS [OR (95% CI): 34.6 (14.14–84.73), $P < 0.001$], diabetes mellitus [OR (95% CI): 4.7 (1.12–19.86), $P = 0.034$], late hospitalization [OR (95% CI): 2.1 (1.12–19.86), $P = 0.033$] and use of nephrotoxic drugs [OR (95% CI): 2.9 (1.12–19.86), $P = 0.006$] were associated with AKI. Longer hospital stays (> 7 days) was also observed among AKI patients (OR=1.3, $P = 0.044$). Additionally, 24.5% AKI patients had renal insufficiencies at discharge that were significantly associated with severe dengue. Overall mortality was 1.8% and all fatal cases had AKI. The incidence of AKI is high at 11.2% among dengue patients, and those with AKI portended significant morbidity, mortality, longer hospital stays and poor renal outcomes.

Biography

Jaiju James Chakola has completed his MBBS from Cochin University of Health and Technology, India, MD in Pediatrics from Rajiv Gandhi University of Health Science and is currently pursuing his DM Nephrology at Sri Ramachandra Institute of Higher Education and Research Centre, Chennai, India. His research interests are Nephrology, Dialysis, Renal Care, etc..

jaijuxameschakola@gmail.com

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