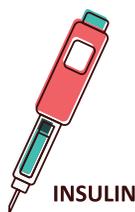


What medications can make this worse?

Many medications used to treat **diabetes** are removed from the body by the kidneys and so the levels can build up in the blood if the kidneys are not functioning properly, with the risk of side effects.

This particularly applies to metformin and a family of medications called sulphonylureas which include glibenclamide, glipizide and gliclazide.

Some people have poor control of their diabetes when they are unwell and may need to start treatment with insulin.



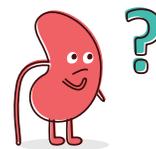
Can I do anything to improve my kidney function?

Our kidneys are very hard working organs.



It is only when they fall below 5% efficiency that they may need help. This will involve a treatment called dialysis. There are some important things which you can do at an earlier stage to help them. This involves healthy living with a healthy weight, lowering salt intake or using low salt alternatives in your diet and not smoking. If you have diabetes or high blood pressure having good control of your diabetes and blood pressure can help stabilise kidney function. Your doctor or nurse can advise you about this. If you have been taking regular non-steroidal anti-inflammatory medication, this will be reviewed and you may be offered an alternative treatment.

I have more questions. What should I do next?



If you have more questions to ask about Acute Kidney Injury you should **make an appointment to discuss these with your doctor.**

You should ask to have your blood pressure checked. Your medications should be reviewed and the doses may need to be adjusted. You may be warned about the use of ibuprofen and other non-steroidal anti-inflammatory drugs and given a plan for your medications if you become unwell.

Acknowledgements

With thanks to Kidney Care UK, British Kidney Patient Association: Understanding Acute Kidney Injury, available online:

<https://www.thinkkidneys.nhs.uk/aki/>

[think-kidney-publications/](#)



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Best Care for Everyone

*Classification number: 011151-05-017
(Review date: April 2022)*



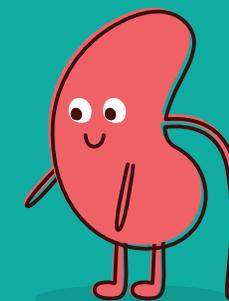
Waitematā
District Health Board

Best Care for Everyone

Protecting your Kidneys

Information for patients at risk of AKI

*What you
need to know*

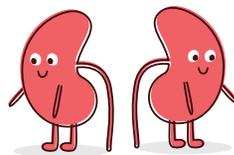


Understanding Acute Kidney Injury (AKI)

This leaflet is for people who *may be at risk* of developing Acute Kidney Injury. It has been designed to answer questions you may have about this condition.

What do the kidneys do?

The kidneys perform five important tasks for the body:

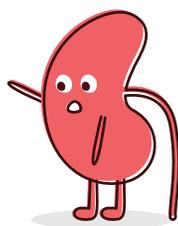


1. They remove waste products and toxins from the body, including drugs, by making urine.
2. They control fluid balance, making sure that we are not overloaded with water or dehydrated.
3. They control blood pressure, keeping it at the right level for body functions.
4. They make vitamin D, which is needed for bone growth.
5. They make a hormone called erythropoietin, which assists the production of red blood cells for delivery of oxygen throughout the body.

When you have Acute Kidney Injury, some or all of these functions may not work as well as normal.



Blood Pressure



What is Acute Kidney Injury?

- ‘Acute’ is a term used to describe something that has occurred over a short time, such as hours or days.
- ‘Kidney Injury’ describes evidence of damage to the kidneys usually with a change in the way the kidney is working, what we call kidney function.



✘ **The best ways to assess kidney function are to measure a waste product in the blood called creatinine and to measure how much urine you are producing.**

What are the usual causes of AKI?

Acute kidney injury is most commonly associated with illnesses when you are unable to eat and drink properly or you are losing extra fluid through diarrhea or vomiting. This may cause your blood pressure to be low and your urine production to reduce.



The **good news** is that if the situation is corrected quickly then your kidneys will probably recover. However if you have the more severe forms of kidney injury then your kidneys may suffer long term damage.



Who is at risk of Acute Kidney Injury?

Everyone is at risk of acute kidney injury if they are unwell. It is very common when people become seriously unwell and affects 1 in 5 people admitted to hospital as an emergency.



The kidneys require adequate blood pressure to function. If blood pressure drops too low then the kidneys may become damaged and not function properly.



Some people are more at risk than others. These include people with long term conditions such as diabetes and high blood pressure. Certain medications also put you at risk.

What medications can make this worse?

The group of medicines most associated with this are called ‘Non Steroidal Anti Inflammatory Drugs’ (NSAIDs). The most common is ibuprofen, whilst others include diclofenac and celecoxib. These drugs reduce the blood supply to the kidneys and should be stopped for a short time if AKI is detected.

All medicines which lower blood pressure, including diuretics (also known as water tablets and include furosemide, bumetanide and spironolactone), can also make things worse. Similarly, you may have to stop these medications for a short time when you are unwell.

