

Effect of Albumin Administration on Acute Kidney Injury after Paracentesis in Hospitalized Patients with and without Chronic Kidney Disease

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N a c a d c e c c e e

Objectives

Methods

AKI = rise in serum Cr of 0.3 or 1.5 times the pre-procedure Cr within 7 days

CKD = Baseline GFR <89 measured from the nadir after the AKI within the last four months prior to procedure

Albumin given (g), ascites removed (cc), anti-hypertensives, diuretics, MOA therapy and SBP presence were recorded.

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Future Directions

- Analyze protective effect of albumin in CKD patients specifically (not just in the whole multivariate model)
- Determine at what level of CKD the risk for AKI increases
- Determine how many unique patients developed AKI
- Correct for multiple procedures on the same patient
- Determine if AKI preceding the procedure increases risk for further AKI
- Determine whether certain classes of anti-hypertensives are less likely to be associated with AKI than others

Thanks

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