NOVEL AUTOMATED ACUTE KIDNEY INJURY ALERTS

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Acknowledgements: Funmi Akinlade, Dr Ajith James, Pete Ayling, John Cooil, Dr Salman Sajid, Dr Ilir Bera
Acute Kidney Injury (AKI) matters

**UK wide:**
- Affects 10-15% adult inpatients
- Death ~28%
- Length of Stay is 10.5 days longer
- Require ITU (x5 risk)
- Require acute filtration/dialysis
- Require chronic dialysis (12.9%)
- Develop Chronic Kidney Disease (x6.74 risk)
Acute Kidney Injury – diagnosis by change in creatinine
Why is it badly recognised?

- Normal range is based on population analysis but...
- Acute Kidney Injury is diagnosed by a change in the creatinine blood test within a particular individual from their baseline

3.6 million admission (last 6 yrs) analysed:
- 36% had bloods done <3 months before admission
- 56% had bloods done <6 months before admission
- 80% had bloods done <12 months before admission
Solution

= Automate detection & alerts

“Could this patient have AKI?”

“This patient may have had AKI”
Summarise

- Acute Kidney Injury (AKI) matters
- Automation
  - 1. set individual patients baseline
  - 2. detect dangerous deviations from this
  - 3. issue alerts
- ...can help save patients lives through earlier recognition
- Can aid development of appropriate services