

병원에서 발생한 급성 신손상의 장기적 예후에 대한 AKIN 기준의 유용성

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The Usefulness of AKIN Criteria to Predict Long Term Outcome of Hospital –Acquired Acute Kidney Injury

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Assessment of short-term outcome in hospital-acquired acute kidney injury (AKI) may underestimate the true burden of disease. It is important to focus to on long term survival. We investigate the long term outcome of hospital acquired AKI according to the Acute Kidney Injury Network (AKIN) criteria stages.

This is a prospective, observational, single center study. All hospital acquired AKI patients were included. We monitored serum creatinine everyday for all patients using a hospital data survey system during the study period from Sep. 2007 to Aug. 2008. We calculated the survival time with Korean national health insurance data system.

Hospital acquired AKI developed in 1.2% of all hospitalized patients and 5.2% of intensive care unit admissions. Among the patients with AKI, 12.5% received renal replacement therapy and 3.1% progressed to end-stage renal disease. The hospital mortality rate was 32.3% and the long term mortality was 63%.

Cumulative mortality for patients with stage 3 was significantly higher than stag1 and 2.

Long term outcome of hospital acquired AKI consist of a high additionl mortality. AKIN criteria is useful to predict long term outcome of hospital acquired AKI.

Key Words: 병원, 급성 신손상, AKIN 기준

Hospital, Acute Kidney Injury, AKIN criteria