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**A COMPARATIVE STUDY OF EARLY VERSUS LATE INITIATION OF
HEMODIALYSIS IN PATIENTS WITH ACUTE KIDNEY INJURY DUE TO SNAKE
ENVENOMATION AND ITS IMPACT ON THE OUTCOME OF THE KIDNEY
FUNCTION**

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Objectives: Snake bite is a common medical emergency and an occupational hazard in India. It is one of the most common causes of community acquired acute kidney injury (AKI) in our country. AKI is mainly seen following bites by the snakes which belong to the Viperidae group. In managing severe AKI, whether to provide dialysis and if required, when to initiate it are unclear. This study aims to observe the mortality and changes in kidney function at 90 days, that occurs in patients with AKI due to snake bite who are subjected to either an early strategy or a delayed strategy of initiation of dialysis.

Methods: In this prospective, single-center, randomized, controlled trial, we assigned patients with snake bite associated AKI, of Stage 2 or 3 of KDIGO classification but without life threatening complications related to AKI, to receive dialysis either within 12 hours of documentation of AKI (early-strategy) or after a delay of 48 hours if renal recovery had not occurred (delayed-strategy). The primary outcome was death at 90 days and degree of renal dysfunction at 90 days.

Results: 53 patients with snake bite associated acute kidney injury underwent randomization and were followed up for 90 days. 25 patients were assigned to receive early dialysis and 28 patients were assigned to receive delayed dialysis. 6 out of 25 patients (24%) assigned to the early dialysis group died and 1 out of 28 patients (4%) assigned to the delayed dialysis group died ($p=0.047$). 3 out of 19 patients in the early dialysis group and 4 out of 23 patients in the delayed dialysis group progressed to chronic kidney disease ($p=0.890$).

Conclusions: Among patients with AKI due to snake bite, there was increased mortality in patients assigned to the early dialysis group but no significant difference in progression from AKI to CKD at 90 days.

Death in patients in early vs late initiation of dialysis