SHORT COMMUNICATION

Acute kidney tubular necrosis

Rashad Hassan*

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Acute tubular necrosis (ATN) is the second most common cause of acute kidney injury in the hospital setting after prerenal azotaemia. It occurs in three clinical stages (initial, maintenance and recovery) and is associated with polyuria in the recovery phase. The duration of both the oliguric (maintenance) and the diuretic phase of acute tubular necrosis is unpredictable, lasting from days to weeks, with the average durations of oliguria and diuresis being 11.6 and 12 days, respectively. Further, the urine

output rarely exceeds 7–8 L in 24 h. Examines the role of this case report a short oliguric phase (24 h or sometime less) in the potentiation of prolonged, marked polyuria on the recovery phase. The early recognition of AKI in such high-risk patients with Gram-negative septicaemia or other hypo perfused states is imperative. Intravenous fluids hydration to match on-going losses early in the course of renal injury can prevent a secondary renal insult and offset progression to chronic renal failure or you can say dialysis dependence.

Key Words: Acute tubular necrosis; acute kidney injury; Cardiorespiratory Failure

DESCRIPTION

t first, we need to know what is acute tubular necrosis so acute tubular necrosis is Inside your kidneys are small tube-shaped structures that remove salt, excess fluids, and waste products from your blood. When the tubules are damaged or destroyed, you develop acute tubular necrosis (ATN), a type of acute kidney injury. Acute tubular necrosis can be many causes but some of the reason is here like the most common cause of ATN is a lack of oxygen reaching the cells of your kidneys. If blood can't reach your kidneys due to blockage on any places or decreased flow, your kidneys can be damaged or destroyed. This lack of blood flow can be caused by certain drugs and sometimes hypotension. Harmful substances in your blood can be also destroying tubules. In the tubules function toxins may change the way cells. Certain chemicals and medications such as antibiotics, anaesthetics, and radiology dyes may cause ATN if your body reacts negatively to them. If you want to know the treatment of acute tubular necrosis then your doctor may prescribe medication to decrease the fluid and waste build-up in your kidneys. You may also be told to restrict your diet to reduce your intake of sodium and potassium because it is not good [1,2].

It is possible you will need to regulate the amount of drinking water you avoid excess fluid retention. Too much fluid can lead to abnormal swelling in your arms, legs and also some body parts. Depending on your health condition, dialysis could be another treatment option for you. This procedure helps your kidneys filter out excess fluids or waste [3-5].

CONCLUSION

To our opinion this is the common problems in today's world and for the prevention to avoid acute tubular necrosis, treat conditions that decrease oxygen and blood flow to the kidneys. Control existing disorders such as heart conditions, diabetes, and liver disease. After using any contrast dyes you need to drink plenty of water. Ask your doctor to monitor your blood if you take medications that may be toxic to your kidneys that causes you need to check.

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Correspondence: Rashad Hassan, Department of Nephrology, Mansoura University, Riyadh, Saudi Arabia, Email: hassanr@yahoo.com Received: March 04, 2021, Accepted: March 18, 2021, Published: March 25, 2021



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