Acute Renal Failure: Causes and Prognosis

FIGURE 8-38
Analysis of the severity and mortality in acute renal failure (ARF) patients needing dialysis. This figure is an example of the use of a severity index for analyzing the effect of treatment on the outcome of ARF. Looking at the mortality rate, it is clear that it is higher in patients who need dialysis than in those who do not. It could lead to the sophism that dialysis is not a good treatment; however, it is also clear that the severity index score for ARF was higher in patients who needed dialysis. Severity index is the mean of the individual severity index of each of the patients in each group [36]. (Data from Liaño et al. [1]).

FIGURE 8-39
Causes of death. The causes of death from acute renal failure (ARF) were analyzed in 337 patients in the Madrid ARF Study [1]. In this work all the potential causes of death were recorded; thus, more than one cause could be present in a given patient. In fact, each dead patient averaged two causes, suggesting multifactorial origin. This could be the expression of a high presence of multiple organ dysfunction syndrome (MODS) among the nonsurviving patients. The main cause of death was the original disease, which was present in 55% of nonsurviving patients. Infection and shock were the next most common causes of death, usually concurrent in septic patients. It is worth noting that, if we exclude from the mortality analysis patients who died as a result of the original disease, the corrected mortality due to the ARF episode itself and its complications, drops to 27%. GI—gastrointestinal; DIC—disseminated intravascular coagulation.

References

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