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Titolo	Reducing Mortality in Acute Kidney Injury // edited by Giovanni Landoni, Antonio Pisano, Alberto Zangrillo, Rinaldo Bellomo
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Disciplina	616.028
Soggetti	Critical care medicine Nephrology Emergency medicine Anesthesiology Intensive / Critical Care Medicine Emergency Medicine
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Nota di bibliografia	Includes bibliographical references at the end of each chapters and index.
Nota di contenuto	Preface -- Part I. Introduction -- Acute Kidney Injury: the plague of the new millennium -- Acute Kidney Injury: Definitions, Incidence, Diagnosis, and Outcome -- Reducing mortality in acute kidney injury: the democracy-based approach to consensus -- Part II. Interventions that May Reduce Mortality -- Continuous renal replacement therapy vs. intermittent hemodialysis: impact on clinical outcomes -- May an "early" renal replacement therapy improve survival? -- Increased intensity of renal replacement therapy to reduce mortality in patients with acute kidney injury -- Citrate anticoagulation to reduce mortality in patients needing continuous renal replacement therapy -- Peri-angiography hemofiltration to reduce mortality -- Continuous venovenous hemofiltration to reduce mortality in severely burned patients -- Perioperative hemodynamic optimization to reduce acute kidney injury and mortality in surgical patients -- Furosemide by continuous infusion to reduce mortality in patients with acute kidney injury -- N-acetylcysteine to Reduce Mortality in Cardiac Surgery -- Fenoldopam and Acute Kidney Injury. Is it time to turn the page?.-

Vasopressin to reduce mortality in patients with septic shock and acute kidney injury -- Terlipressin reduces mortality in hepatorenal syndrome -- Albumin to reduce mortality in cirrhotic patients with acute kidney injury -- Extracorporeal Removal of Serum Free Light Chains in Patients with Multiple-Myeloma Associated Acute Kidney Injury -- Can intravenous human immunoglobulins reduce mortality in patients with (septic) acute kidney injury? -- Part III. Interventions that May Increase Mortality -- Fluid overload may increase mortality in patients with Acute Kidney Injury -- Hydroxyethyl starch, acute kidney injury, and mortality -- Loop diuretics and mortality in patients with acute kidney injury -- Part IV. Update -- Reducing Mortality in Patients with Acute Kidney Injury: A Systematic Update.

Sommario/riassunto

This book describes the techniques, strategies, and drugs that have been demonstrated by at least one paper published in a peer-reviewed journal to significantly influence survival in patients with or at risk for acute kidney injury. Each chapter focuses on a specific intervention. The scope is accordingly wide, with coverage of topics as diverse as the type, timing, and dose of renal replacement therapy (RRT), anticoagulation and specific indications for RRT, perioperative hemodynamic optimization, fluid balance, diuretics, colloids, fenoldopam, terlipressin, N-acetylcysteine, and vasopressin. A variety of settings are considered, including critically ill patients, cardiac surgery, and hepatic and hematologic disorders. The topic selection was made using a democracy-based approach in which hundreds of specialists from dozens of countries expressed, via the web, whether they agreed with these topics and whether they used the techniques in their daily clinical practice. The clear text is supported by "how to do" sections and "key point" boxes that provide easily accessible practical information. The book will be of interest for a wide variety of specialists, including intensivists, nephrologists, emergency doctors, and anesthesiologists.
