

NEPHROTOXICITY AND DRUG AWARENESS

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Renal injury from drugs may be mild and transient or, if undetected may result in acute renal failure, nephrotic syndrome, renal tubular dysfunction or chronic kidney disease, with its associated high morbidity and mortality.

There are many factors that increase the risk of drug-induced nephrotoxicity. These include patient related factors such as age, sex, race and disease states for example diabetes mellitus, pre-existing kidney disease, dehydration, electrolyte disturbances, sepsis and shock. These factors may be compounded by drug related factors and drug interactions.

The widely recognized nephrotoxic drug groups – aminoglycosides, ACE inhibitors, analgesics and antibiotics and known “danger drugs”: cyclosporin and amphotericin will be discussed and some of the newer agents such as cox-11 inhibitors. In addition some of the nephrotoxic evidence for alternative medicinal products, such as herbal remedies and Chinese medicines will be explored.

General principles and possible strategies to reduce the risks of drug induced kidney damage will be presented. The difficulty of proving cause and effect of suspected nephrotoxins will be discussed and the importance of reporting episodes of drug induced kidney disease to the relevant authorities.