

## ACUTE KIDNEY INJURY IN HOSPITALIZED PATIENTS WITH COVID-19

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### ABSTRACT

**Introduction.** Acute kidney injury (AKI) has been reported as a frequent complication among critically ill patients admitted with COVID-19, associated with high mortality and recognized as an indicator of multiple organ dysfunction and disease severity. **Material and methods.** A retrospective study was conducted, including patients with confirmed COVID-19 infection admitted to Republican Clinical Hospital «Timofei Mosneaga» between June 01, 2020 and August 31, 2020. Obtained data were compared between patients with AKI and without AKI. **Results.** Of the 81 patients included in the study, 49 (60,49%) were male and 32 (39,50%) were female. The median age was 61 years (interquartile range - 55-60). Twenty patients

(24,69%) had acute kidney injury, of whom 4 patients (20%) required renal replacement therapy. Of the 20 patients, 5(25%) developed stage I AKI, 7 (35%) developed stage II and 8 (40%) stage III. Risk factors for the development of AKI during hospitalization were: assisted breathing and vasopressor support. Of the twenty patients with AKI and urinalysis, 65% had proteinuria, 45% had hematuria. Mortality rates were significantly higher in patients with AKI (90% versus 36,06%). **Conclusions.** Patients with COVID-19 have a high incidence of acute kidney injury. At the same time, AKI significantly increases the mortality of patients admitted to intensive care units. Of all patients with AKI, only 10% survived with recovery of renal function until discharge.