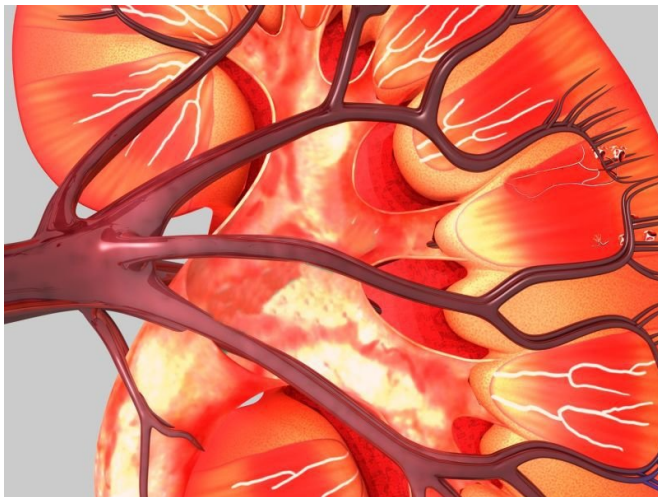


Early post-op APAP exposure may cut AKI risk in peds cardiac Sx

15 May 2018



against postoperative AKI after adjustment for multiple confounding variables (odds ratio, 0.86 per each additional 10 mg/kg). Findings were replicated in the validation cohort, which included 333 infants with a [median age](#) of 14.1 months; 48.6 percent had AKI. Acetaminophen doses were 60 and 70 mg/kg in those with and without AKI, respectively, with an adjusted odds ratio of 0.91 for each additional 10 mg/kg.

"Further analysis to validate these findings, potentially through a prospective, randomized trial, may establish acetaminophen as a preventive agent for AKI," the authors write.

One author disclosed financial ties to Merck.

More information: [Abstract/Full Text](#) ([subscription or payment may be required](#))

(HealthDay)—For pediatric patients undergoing cardiac surgery, early postoperative acetaminophen exposure may be associated with a reduced rate of acute kidney injury (AKI), according to a study published online May 14 in *JAMA Pediatrics*.

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Sara L. Van Driest, M.D., Ph.D., from the Vanderbilt University School of Medicine in Nashville, Tenn., and colleagues conducted a [retrospective cohort study](#) involving primary and validation cohorts of children older than 28 days admitted for cardiac surgery. The authors examined whether early postoperative [acetaminophen](#) exposure correlated with reduced risk of AKI.

The primary cohort included 666 children with a median age of 6.5 months; 51.2 percent had AKI. The researchers found that those with AKI had lower median acetaminophen doses than those without AKI, in unadjusted analyses (47 versus 78 mg/kg). Acetaminophen [exposure](#) was protective

APA citation: Early post-op APAP exposure may cut AKI risk in peds cardiac Sx (2018, May 15) retrieved 6 December 2022 from <https://medicalxpress.com/news/2018-05-early-post-op-apap-exposure-aki.html>

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