

Bookmark File

PDF Contrast

Induced

Contrast

Induced

Nephropathy

A Literature

Review

Introduction and
MethodsPatients
with acute
ischemic stroke

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Induced

(AIS) undergoing
Nephropathy A
mechanical

Literature Review
thrombectomy

(MT) receive

iodinated contrast

agent both for CT-
angiography (CTA)

and MT. The

incidence of acute

kidney injury (AKI,

defined as

increase of serum

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creatinine

u226525% or

u22650.5 mg/dl

from baseline) in

these patients is

not known. We

retrospectively

assessed the rate

of AKI in 1092

consecutive AIS

patients (mean

age 72.9 years)

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Nephropathy A
Literature Review

treated with MT
after CTA at our
neurovascular
center from
01/2015-12/2017.

ResultsData on
kidney function
was available in
1020 (93.4%)
patients. Of these,
59 (5.8%) patients
developed AKI,

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Nephropathy, A
Literature Review

four (0.4%) of which needed hemodialysis.

Patients with AKI had significantly more often known chronic kidney disease ($p=0.002$), diabetes mellitus ($p=0.018$), and received MT for tandem occlusion

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Nephropathy A
Literature Review

of ACI and ACM
($p=0.003$). Patients
with additional CT-
Perfusion ($n=105$)
had no
significantly higher
rate of AKI. NIHSS
score at discharge
was non-
significantly higher
(median 6 vs. 4,
 $p=0.052$) and in-

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Nephropathy A
Literature Review

hospital mortality was significantly higher in patients with AKI (20.3% vs. 7.0%, $p < 0.001$).

In multivariate logistic regression analysis, only diabetes mellitus was an independent predictor for AKI,

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while higher age,

higher NIHSS

Literature Review
score at

admission, AKI,

and contrast agent

volumes (CAV)

150ml during MT

were independent

predictors for

death. CAV

>150ml were due

to significant

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longer MT
Nephropathy A
procedures

Literature Review

(90u00b1148 min

vs. 30u00b1122min

u2264 150ml).Con

clusionsAKI is rare

in AIS patients

receiving CTA and

MT and most often

transient. Only

0.4% needed

hemodialysis. AKI

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is associated with
higher mortality,
but 8/12 deaths

were caused by

large brain

infarction or SICH.

This issue of MRI

Clinics of North

America focuses

on Update on

Imaging Contrast

Agents, and is

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edited by Drs.

Carlos Zamora,

Mauricio Castillo,

Richard Semelka.

Articles will

include: Historical

Perspective of

Imaging Contrast

Agents; Current

Radiographic

Iodinated Contrast

Agents; Contrast-

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enhanced

Nephropathy A

Sonography;

Literature Review

Myelography:

From Lipid-based

to Gadolinium-

based Contrast

Agents; Acute

Allergic Reactions

with Gadolinium-

based Contrast

Agents: Diagnosis

and Treatment;

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Deposition and
Chronic Toxicity of
Gadolinium-based

Contrast Agents;

Managing Allergic

Reactions to

Contrast Agents;

Safety of Contrast

Material Use in

Children;

Molecular Imaging

and Contrast

Bookmark File

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Agents; Contrast

Nephropathy: A

Agents for MR

Literature Review

Imaging:

Gadolinium,

Manganese, SPIO,

Superparamagneti

c Iron Platinum,

and Oral Agents;

Contrast-induced

Nephropathy:

Pathophysiology,

Manifestations,

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Prevention, and
Nephropathy A
Management; and
Literature Review
more!

Relationship
Between the Urine
Flow Rate and
Risk of Contrast-
Induced
Nephropathy After
Emergent
Percutaneous
Coronary

Bookmark File

PDF Contrast

Induced

Intervention

Nephropathy A

Halogens—Advan

Literature Review

ces in Research

and Application:

2012 Edition

Renal Disease and

coronary,

peripheral and

structural

interventions, An

Issue of

Interventional

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Cardiology Clinics

Nephropathy A

Risk Factors,

Literature Review

Management, and

Bailout

Techniques

Contrast Induced

Nephropathy:

Prevalence,

Consequences

and Strategies for

Risk Reduction in

Clinical Practice

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*Damage to the
kidneys continues to
be a serious problem
related to the use of
gadolinium as a
contrast agent. This
issue not only
describes the dangers
and controversies
related to contrast-
induced
nephropathies but*

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PDF Contrast

Induced

*also provides advice
for identifying
patients at risk and*

*recommending other
imaging options.*

*Abstract : Abstract: A
low urine flow rate is
a marker of acute
kidney injury.*

*However, it is unclear
whether a high urine
flow rate is*

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*associated with a
reduced risk of
contrast-induced*

*nephropathy (CIN) in
high-risk patients. We
conducted this study
to evaluate the
predictive value of
the urine flow rate
for the risk of CIN
following emergent
percutaneous*

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coronary intervention

(PCI). We

prospectively

examined 308

patients undergoing

emergent PCI who

provided consent.

The predictive value

of the 24-hour

postprocedural urine

flow rate, adjusted

by weight (UR/W,

Page 21/177

assessed using multivariate logistic regression analysis.

The cumulative incidence of CIN was 24.4%. In particular, CIN was observed in 29.5%, 19.5%, 16.7%, and 32.0%

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*of cases in the UR/W
quartile (Q)-1 (≤ 0.94
mL/kg/h), Q2*

(0.94–1.30 mL/kg/h),

Q3 (1.30–1.71

mL/kg/h), and Q4

(≥ 1.71 mL/kg/h),

respectively.

Moreover, in-hospital

death was noted in

7.7%, 3.9%, 5.1%,

and 5.3% of patients

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Nephropathy A
Literature Review
*in Q1, Q2, Q3, and
Q4, respectively.*

*After adjusting for
potential confounding
predictors,*

*multivariate analysis
indicated that*

*compared with the
moderate urine flow
rate quartiles (Q2 +
Q3), a high urine*

flow rate (Q4) (odds

Bookmark File

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Induced
Nephropathy A
Literature Review
*ratio [OR], 2.69;
95% confidence
interval [CI],*

1.27–5.68; P =

*0.010) and low urine
flow rate (Q1) (OR,
2.23; 95% CI,*

1.03–4.82; P =

0.041) were

significantly

associated with an

increased risk of

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CIN. Moreover, a moderate urine flow rate (0.94–1.71

mL/kg/h) was

significantly

associated with a

decreased risk of

mortality. Our data

suggest that higher

and lower urine flow

rates were

significantly

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*associated with an
increased risk of CIN
after emergent PCI,*

*and a moderate urine
flow rate (0.94–1.71*

mL/kg/h) may be

associated with a

decreased risk of CIN

with a good long-

term prognosis after

emergent PCI.

Complications of

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Neuroendovascular

Nephropathy A

Procedures and

Literature Review

Bailout Techniques

Assessing Risk Score

and Prophylaxis for

Contrast Induced

Nephropathy

Contrast Induced

Nephropathy

Proceedings of the

Contrast-induced

Nephropathy

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Induced

Consensus Panel /c

Nephropathy A

Guest Editors,

Literature Review

Richard Solomon and

Gilbert Deray

Update on Imaging

Contrast Agents, An

Issue of Magnetic

Resonance Imaging

Clinics of North

America, E-Book

Emerging as a

new sub-

Bookmark File

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specialization

within the

hospitalist

community, the

neurosurgery

hospitalist

provides

preoperative

risk

stratification,

advises on

managing pre-

and

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review
*postoperative
complications,
and helps*

*doctors make
decisions about
when to involve
specialists
other than
neurosurgeons.*

*This
collaborative
approach to the
neurosurgery*

Bookmark File

PDF Contrast

Induced

*patient has
been shown to
offer effective
care since
hospitalists
can be better
attuned than
specialists to
multiple
medical
problems that
most patients
have. Medical*

Bookmark File

PDF Contrast

Induced

Management of

Neurosurgical

Patients is a

first of its

kind textbook

providing a

standardized

source of

information for

neurosurgery

hospitalists in

order to

establish a

Bookmark File

PDF Contrast

Induced

*common ground
and improve
their knowledge
and training.
The work will
focus on
management of
CNS infections,
management of
bleeding in the
context of CNS
surgery (a
potentially*

Bookmark File

PDF Contrast

Induced

*catastrophic
complication),*

Literature Review
management of

sodium and

blood glucose

levels

including

steroid-induced

hyperglycemia,

perioperative

pain control,

and management

of pressure

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

*injuries and
rehabilitation
in the context
of CNS injury.*

*“Brain
circulation is
a true road map
that consists
of large
extended
navigation
territories and
a number of*

Bookmark File

PDF Contrast

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unimagined and

undiscovered

routes." Dr.

Patricia

Bozzetto

Ambrosi This

book combines

an update on

the review of

cerebrovascular

diseases in the

form of

textbook

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

*chapters, which
has been
carefully*

reviewed by Dr.

Patricia

Bozzetto

Ambrosi, Drs.

Rufai Ahmad and

Auwal Abdullahi

and Dr. Amit

Agrawal, high-

performance

academic

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Induced

*editors with
extensive
experience in n
eurodisciplines
, including
neurology,
neurosurgery,
neuroscience,
and
neuroradiology,
covering the
best standards
of neurological*

Bookmark File

PDF Contrast

Induced

practice

involving basic

and clinical

aspects of

cerebrovascular

diseases. Each

topic was

carefully

revised and

prepared using

smooth,

structured

vocabulary,

Bookmark File

PDF Contrast

Induced

*plus superb
graphics and
scientific*

illustrations.

*In emphasizing
the most common
aspects of
cerebrovascular
diseases:*

*stroke burden,
pathophysiology
, hemodynamics,
diagnosis,*

Bookmark File

PDF Contrast

Induced
Nephropathy, A
Literature Review

*management,
repair, and
healing, the
book is
comprehensive
but concise and
should become
the standard
reference guide
for this
neurological
approach.*

Complications

Bookmark File
PDF Contrast
Induced
of
Nephropathy A
**Cardiovascular
Literature Review
Procedures
An Updated
Comprehensive
Review
Clinical
Insights and
Practical
Guidance ; a
Report from the
CIN Consensus
Working Panel**

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PDF Contrast

Induced

Risk Score

Model for A

Literature Review

Prediction of C

ontrast-induced

Nephropathy

After

Percutaneous

Coronary

Intervention

Does it Matter?

Lower Extremity

CT Angiograms

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review
**and the Effect on
Kidney Function
in Orthopedic
Trauma**

Patients We

hypothesize that

our institution

obtains CT

angiograms

(CTAs) to

evaluate for

vascular injury

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more frequently

than indicated

and that the

likelihood of

contrast-induced

nephropathy

(CIN) increases in

patients with

GFR60. CTAs are

often obtained in

lower extremity

(LE) trauma to

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PDF Contrast

Induced

Nephronathy A

Literature Review

evaluate vascular injury. Commonly accepted

indications to obtain CTAs in lower extremity trauma are an ankle-brachial index (ABI) 0.9 or hard signs of vascular injury. There is a paucity

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Induced

**of literature
regarding risk
factors for**

**contrast-induced
nephropathy**

(CIN) following

lower extremity

CTAs in a trauma

setting. After IRB

approval,

patients with

CTAs following

Bookmark File

PDF Contrast

Induced

Nephropathy. A

Literature Review

LE trauma were identified using an imaging database between 2010 and 2018.

Patients with CTAs following LE trauma with renal function labs were included in the

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Nephropathy A
Literature Review

study. Patient charts and imaging were reviewed for demographic data, injuries, kidney function labs, physical exam, treatments, and follow-up. Normality was assessed using

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Shapiro-Walk

Nephropathy A

Test and
Literature Review

differences

between

variables were

assessed using

Wilcoxon Signed

Rank Test and

Fisheru2019s

Exact Test.CTAs

were performed

on 257 LEs of 199

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PDF Contrast

Induced
Nephropathy A
Literature Review

patients. Of the 257 CTAs, 162 (63%) LE CTAs were not indicated (no hard signs of vascular injury, ABI0.9). Of the 95 indicated CTAs, 21 (7.4%) limbs had a positive finding on initial

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

CTA (thrombus, occlusion, extravasation, or pseudoaneurysm) concerning for a vascular injury.

Of these 21 patients with positive findings, 12 (4.7%) had a lower extremity vascular injury

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PDF Contrast

Induced

requiring interven

tion. There was a

statistically

significant

increase in

creatinine after

obtaining a CTA

in these 257

patients

($p=0.010$).

Patients with

initial

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

**GFR60ml/min
were more likely
to develop AKI
compared to
patients with
GFR60ml/min
($p=0.001$). There
was no difference
in rate of AKI in
patients with a
higher Injury
Severity Score**

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

(ISS), in both groups of GFR60ml/min (p=0.15) or GFR Part I “Serum Cystatin C (sCy C)” - Serum creatinine level does not increase in patients with acute kidney injury (AKI), until

Bookmark File

PDF Contrast

Induced

**moderate to
severe reduction
in glomerular
filtration rate
(GFR) occurs.**

**Thus its use for
estimating GFR
in early AKI
delays detection
of kidney damage
and making
important**

Bookmark File

PDF Contrast

Induced

therapeutic

decisions.

Literature Review

Moreover, serum

cystatin C is not

affected by .

Gender, . Age, .

Race, . Muscle

mass and also

does not suffer

from lag period

for its rise in

early AKI. Several

Bookmark File

PDF Contrast

Induced

**healthy subjects
were studied and
AKI patients over**

a period of 2

years at one of

tertiary care

hospital. Serum

creatinine and

serum cystatin C

were studied and

analyzed in

relevance to early

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

AKI. It was found that 56.2% of patients of AKI group had normal levels of serum creatinine in early phase, while all patients had elevated serum cystatin C at same time.

Multiple logistic

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Induced

regression

**analysis revealed
cystatin C-based**

GFR reflecting

decline in GFR

with worsening

AKI in better than

creatinine-based

GFR. An attempt

has been made in

this Booklet in

Part I, to include

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

**evidence-based
study of serum
creatinine and
serum cystatin C
levels in AKI to
establish its
relevance in the
early period of
AKI and possible
favorable
outcome. Part II
Further, in Part II**

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PDF Contrast

Induced

**I have
endeavored to
include the study**

to assess

changes in

Cystatin C (CyC)

after 48 h post

contrast media

exposure, and to

know whether it

was a reliable

indicator of acute

Bookmark File

PDF Contrast

Induced

**kidney injury and
the validity of a
risk scoring tool**

for contrast-

induced acute

kidney injury (CI-

AKI). Dr. H. K.

Saboowala.

The Effect of

Alprostadiol on

Preventing

Contrast-induced

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review
**Nephropathy for
Percutaneous
Coronary**

**Intervention in
Diabetic Patients
Preventive
Effects of
Alprostadil
Against Contrast-
Induced
Nephropathy
Inpatients With**

Bookmark File

PDF Contrast

Induced

Renal

Nephropathy A

Literature Review

Undergoing

Percutaneous

Coronary

Intervention

Prevalence

Consequences

and Strategies for

Risk Reduction in

Clinical Practice -

Symposium

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PDF Contrast

Induced
Nephropathy A
Literature Review

**Contrast-Induced
Nephropathy in
STEMI Patients**

**With and Without
Chronic Kidney
Disease**

**Incidence of
Contrast Induced
Nephropathy
Post Coronary
Angiography, a
Prospective**

Page 67/177

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Study at Queen

Nephropathy A

Alia Heart

Literature Review

**Institute **

Journal of the

Royal Medical

Services .- 2014,

Vol. 21, No. 1

OBJECTIVE: To

evaluate the

comparative

effectiveness of

interventions

(intravenous [IV]

Page 68/177

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Induced

Nonnephropathy A

Literature Review

fluids, N-acetylcysteine, sodium bicarbonate, and statins, among others) to reduce the risk of contrast-induced nephropathy (CIN), need for renal replacement therapy, mortality, cardiac complications, prolonged length of

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PDF Contrast

Induced

Nonbropathy A

Literature Review

***stay, and other
adverse events after
receiving low-
osmolar contrast
media (LOCM) or iso-
osmolar contrast
media (IOCM). DATA
SOURCES: We
searched for original
published studies in
MEDLINE(r),
Embase(r), and the
Cochrane Library
through July 8,***

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Nonbronchopathy A

ClinicalTrials.gov

**2015. We also searched
ClinicalTrials.gov
and the Scopus
database.**

***METHODS: Two
reviewers
independently
reviewed each
article for eligibility.
For each study, one
reviewer extracted
the data and a
second reviewer***

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Induced

Nonphorbol A

Literature Review

verified the accuracy. Both reviewers assessed study quality.

Together, the reviewers graded the strength of evidence (SOE) on preventing CIN and other adverse outcomes for the comparisons of interest. The team quantitatively

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PDF Contrast

pooled results of studies that were sufficiently similar using a random-effects model. We considered a 25-percent relative risk difference to be clinically important. RESULTS: We found 163 randomized controlled trials (RCTs) and 23 prospective studies

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PDF Contrast

Induced

Nonbromathy A

liturgic Review

of interventions to prevent CIN, including 67 RCTs comparing N-acetylcysteine with IV saline versus IV saline with or without a placebo; 28 RCTs comparing IV sodium bicarbonate versus IV saline; 7 RCTs comparing IV sodium bicarbonate

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PDF Contrast

Induced

versus N-

Nonbronchopathy A

**acetylcysteine plus
IV saline; 8 RCTs**

comparing a statin

versus IV saline; 5

RCTs comparing a

statin plus N-

acetylcysteine

versus N-

acetylcysteine; 6

RCTs comparing

statin versus statin,

statin by dose, or

statins plus other

Bookmark File

PDF Contrast

Induced

**agents; 5 RCTs
comparing an**

adenosine Review

antagonist versus IV

saline; 6 RCTs

investigating

hemodialysis or

hemofiltration

versus IV saline; 6

RCTs comparing

ascorbic acid versus

IV saline, and 3

RCTs comparing

ascorbic acid to N-

Bookmark File

PDF Contrast

Induced

acetylcysteine.

Nonbronchopathy A

**Although we found
many studies**

Literature Review

investigating other

interventions, the

studies were too

small and too few to

support conclusions

regarding the

comparative

effectiveness of

those interventions.

The studies were

published between

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1998 and 2015. The SOE was low that high-dose [$>1,200$ mg/day] N-acetylcysteine had a small clinically unimportant effect in preventing CIN when compared with IV saline (pooled risk ratio [RR], 0.78; 95% confidence interval [CI], 0.59 to 1.03); and the SOE

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Nephropathy A

Literature Review

was low that low-dose [d1,200 mg/day] N-acetylcysteine had a borderline clinically important effect in preventing CIN when compared with IV saline (RR, 0.75; 95% CI, 0.63 to 0.89). A sensitivity analysis suggests the effect was clinically important

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when N-acetylcysteine was given for LOCM (moderate SOE; RR, 0.69; 95% CI, 0.58 to 0.84), but not when it was given for IOCM (low SOE; RR, 1.12; 95% CI, 0.74 to 1.69). Another sensitivity analysis found that the RR estimates did not differ between IV

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Nonbromopathy A

literature Review

and intra-arterial routes of administration of contrast media. The SOE was low that using a statin plus N-acetylcysteine was more effective than N-acetylcysteine alone in preventing CIN in patients receiving intra-arterial contrast media (RR, 0.52;

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95% CI, 0.29 to 0.93), and the SOE was low for a clinically important difference that was not statistically significant when comparing a statin plus IV saline to IV saline alone (RR, 0.68; 95% CI, 0.39 to 1.20). The SOE was low that IV sodium bicarbonate did not

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Induced

Nephropathy A

Review

differ from IV saline in the risk of CIN (RR, 0.93; 95% CI, 0.68 to 1.27). The SOE was low for a clinically important reduction in CIN that was not statistically significant when comparing IV sodium bicarbonate with IV saline in patients receiving LOCM (RR, 0.65;

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***95% CI, 0.33 to 1.25).
The SOE was low for***

a clinically Review

important reduction

in CIN that was not

statistically

significant when

comparing ascorbic

acid with IV saline

(RR, 0.72; 95% CI,

0.48 to 1.01). The

SOE was low that

use of hemodialysis

versus IV saline to

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Nephropathy A

Literature Review

prevent CIN did not reduce the risk of CIN and may even be harmful (RR, 1.50; 95% CI, 0.56 to 4.04).

CONCLUSIONS: The evidence shows a clinically important and statistically significant benefit in studies of three comparisons: low-dose N-

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Nonnephropathy A
Literature Review

***acetylcysteine
compared with IV
saline, N-
acetylcysteine
compared with IV
saline in patients
receiving LOCM,
and statins plus N-
acetylcysteine
compared with N-
acetylcysteine alone
in patients receiving
intra-arterial
contrast media.***

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Nephropathy A

Literature Review

Future research is needed to determine whether statins can reduce CIN in patients receiving IV contrast media, and to further define specific contexts in which patients could benefit from use of N-acetylcysteine.

OBJECTIVES: To evaluate the comparative effects

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Nephropathy: A

Literature Review

of different types of contrast media with respect to the risk of developing contrast-induced

nephropathy (CIN) by synthesizing the current literature.

DATA SOURCES:

We searched for original studies in MEDLINE(r), Embase(r), and the Cochrane Library

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*through October 1,
2014. We also*

*searched for studies
in ClinicalTrials.gov
and the Scopus
database.*

***METHODS: Two
reviewers***

***independently
reviewed each
article to identify
randomized
controlled trials***

(RCTs) that reported

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Nonbromathy A

Literature Review

***on CIN-related
outcomes in
patients after
receiving low-
osmolar contrast
media (LOCM) or iso-
osmolar contrast
media (IOCM). We
included head-to-
head comparisons
of one LOCM versus
another LOCM or of
LOCM versus IOCM.
(Only 1 IOCM is***

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*currently available
in the United A*

States.) For each

*study, one reviewer
extracted the data
and a second*

*reviewer verified the
accuracy. Both
reviewers assessed
the risk of bias for
each study.*

*Together, the
reviewers graded
the strength of*

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Induced

Nonbony A

Literature Review

evidence for the comparisons and outcomes of interest. We quantitatively pooled the results of studies that were sufficiently similar, using a 25-percent relative risk reduction as the threshold for a minimally important difference.

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RESULTS: We identified five RCTs that compared two or more LOCMs, including two studies of intra-arterial administration, two studies of intravenous administration, and one study examining both routes. We identified

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Nonbiphenyl A

Library Review

25 RCTs that compared IOCM with LOCM, including 18 studies of intra-arterial administration and 7 studies of intravenous administration. No study comparing LOCMs reported a statistically significant or clinically important

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PDF Contrast

Induced

Nonbiphenyl A

Literature Review

difference between study arms, and the overall analysis did not suggest that any one LOCM was superior to another. In a meta-analysis, we found a borderline significant reduction in short-term CIN risk with IOCM compared with a diverse group of

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PDF Contrast

Induced

Nonphorathy A

Review

LOCMS (pooled relative risk, 0.80; 95% confidence interval [CI], 0.65 to 0.99, $p=0.045$). When the analysis was stratified by route of administration, the aggregate pooled relative risk was 0.80 (95% CI, 0.64 to 1.01) for intra-arterial and 0.84 (95% CI, 0.42 to 1.71)

Bookmark File

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Induced

Nonbronchopathy A

Litres: RCM

for intravenous. In studies that investigated IOCM versus LOCM, the outcomes of mortality, cardiovascular outcomes, need for renal replacement therapy, and imaging quality or diagnostic accuracy showed no significant

Bookmark File

PDF Contrast

Induced

Nephropathy A

Litmeting Effic

difference between groups. One study comparing different LOCMs investigated the outcomes of death and adverse events, and found no difference between groups.

CONCLUSIONS: We found low strength of evidence that the risk of CIN did not differ between

Bookmark File

PDF Contrast

Induced

Nonnephropathy A

Literature Review

LOCMs, and moderate strength of evidence that IOCM had a slightly lower risk of CIN than LOCM. The lower risk was not clinically important and just reached statistical significance.

Contrast-induced Nephropathy

Contrast Induced

Bookmark File

PDF Contrast

***Induced
Nephropathy and
Nephrogenic A
Systemic Fibrosis
Incidence,
Pathophysiology,
Diagnosis,
Prevention and
Prognosis
New Insight into
Cerebrovascular
Diseases
The Effect of
Remote Ischaemic
Preconditioning on***

Bookmark File

PDF Contrast

Induced

***Contrast Induced
Nephropathy in the
Clinical Setting of
Coronary***

***Angiography and
Percutaneous
Coronary
Intervention***

Neuroendovascular
and
neurointerventional
therapy is a
specialty where

Bookmark File

PDF Contrast

Induced

disseminating

Nephropathy A

personal

Literature Review

knowledge and

expert opinion is

extremely

important, owing to

the lack of large-

scale clinical trials.

The management

of complications

that occur during

or immediately

Bookmark File

PDF Contrast

Induced

after therapeutic

Nephropathy. A

interventions is

Literature Review

particularly

challenging

because these can

significantly affect

patient outcomes.

This book presents

how various

complication

scenarios are

handled by well-

Bookmark File

PDF Contrast

Induced

qualified

Nephropathy A
Literature Review

authorities in the
field of

neurointervention

from three

disciplines:

neurology,

neurosurgery, and

neuroradiology.

Contributors

describe their

management of

Bookmark File

PDF Contrast

Induced

these

Nephropathy A

complications,

Literature Review

focusing on the

common principles

that all the

specialists agree

on, and give tips

and tricks for

'bailout'

procedures to help

get the practitioner

out of trouble. The

Bookmark File

PDF Contrast

Induced

Nephropathy, A

Literature Review

book is well
illustrated and
covers the full
range of
neuroendovascu-
lar and
neurointerventional
procedures. The
book will appeal to
neurointerventionis-
ts,
neuroradiologists,

Bookmark File

PDF Contrast

Induced

stroke physicians,
neurosurgeons
and vascular

surgeons for its
practical approach
to managing these
commonly
encountered
problems.

This textbook
provides
interventional

Bookmark File

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Induced

Nephropathy A
Literature Review

cardiologists,
endovascular
interventionalists,
and physicians in
training with a
comprehensive
resource on the
prevention and
management of
complications in
interventional
cardiology. The

Bookmark File

PDF Contrast

Induced

book focuses
specifically on risk
factors,

prevention, and
management with
conventional
and/or with bailout
techniques and
devices. It includes
many images of
common and rare
complications and

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

of devices. The first section, on general principles, includes quality assurance, training requirements, legal considerations, adjunctive pharmacotherapy, and conscious sedation.

Subsequent

Page 110/177

Bookmark File

PDF Contrast

Induced

sections cover

Nephropathy A

general

Literature Review

complications of

invasive

procedures and

complications of

specific coronary

interventions,

noncoronary

cardiac

interventions,

peripheral vascular

Bookmark File

PDF Contrast

Induced

procedures,

Nephropathy A

pediatric

Literature Review

interventions, and

electrophysiology

procedures. A

companion

website includes

videos of over 30

complications and

bailout techniques.

Protecting

Kidneys,

Bookmark File

PDF Contrast

Induced

Protecting Lives

Nephropathy A

Lower Extremity

Literature Review
CT Angiograms

and the Effect on

Kidney Function in

Orthopaedic

Trauma Patients

A Comprehensive

Review

Clinical Insights

and Practical

Guidance ; a

Page 113/177

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

Report from the
CIN Consensus
Working Panel ;
this Supplement is
Based on Outputs
Generated by an
Expert Working
Panel that Met in
November 2004 in
London, United
Kingdom and in
September 2005 in

Bookmark File

PDF Contrast

Induced

Nice, France

Nephropathy. A

Out of Operating

Literature Review

Room Anesthesia

Background:

Coronary

angiography is

associated

with a 4-15%

chance of cont

rast-induced

nephropathy

(CIN). While

Bookmark File

PDF Contrast

Induced

the cause of
Nephropathy A

CIN is still
Literature Review
not

understood,
renal ischemia
and free
radical
effects on
tubular
epithelial
cells are
thought to be

Bookmark File

PDF Contrast

Induced

responsible.

Nephronathy A

Literature Review

increased

hydration, the

antioxidant

properties of

sodium

bicarbonate

are thought to

decrease the

direct toxic

effects seen

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

in CIN. The
question of
this

treatment's
efficacy has
been asked
since its
inception, and
no definitive
conclusion has
been reached.

The purpose of

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

this
systematic
review is to
compare and
contrast the
most current
randomized
trials,
assessing the
quality of the
studies
involved, and

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

to give a
practicing
clinician a
more complete
understanding
of the
outcomes.

Methods:
Exhaustive
search of
available
medical

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

literature
from 2006 to
the present

for randomized
control trials
regarding cont
rast-induced
nephropathy in
patients
undergoing non-
emergent
coronary

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

angiography.
The reviewed
studies

examined the
significance
of sodium
bicarbonate in
addition to
hydration
versus
hydration
alone,

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

measured by
pre- and post-
operative

renal

function.

Results: The
five studies
reviewed do
not agree on
the efficacy
of sodium
bicarbonate

Bookmark File

PDF Contrast

Induced

administration
for renal

Nephropathy A
Literature Review

prophylaxis,

although all

state that

increased

hydration is

the gold

standard, and

that sodium

bicarbonate is

not associated

Bookmark File

PDF Contrast

Induced

with increased

Nephropathy A
adverse

Literature Review
effects.

Multiple

studies showed

no statistical

significance

of renal

protection

when compared

to hydration

alone,

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

although
methods of
administration
and several
other
confounders
were
identified
when the
trials were
analyzed en
masse.

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

Conclusion:
Repeated,
definitive,
single
protocol
studies have
yet to
determine the
efficacy of
sodium
bicarbonate
administration

Bookmark File

PDF Contrast

Induced

in patients

Nephropathy A

undergoing

Literature Review

cardiac

angiography,

but all

current

studies can

agree that use

of this

compound for

renal

prophylaxis is

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

not associated
with an
increased risk
to the
patient.

A complete
clinically
focused guide
to managing
the full
spectrum of
kidney

Bookmark File

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Induced
Nephropathy A
Literature Review

diseases and
hypertension A
Doody's Core
Title! "an up-
to-date,
accessible
guide that
covers all
major clinical
aspects of the
adult patient
with diseases

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

involving the
kidneys and
hypertension.

Numerous
figures and
tables are
well
integrated
into
structured
chapters
creating an

Bookmark File

PDF Contrast

Induced
Neuropathy A
Literature Review

easy flow of
information
that helps
readers
capture key
points....In
contrast to
many other
books in this
area, this one
provides a
concise yet

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Induced
Nephropathy A
Literature Review

comprehensive
review of each
topic without
getting lost
in too much
detail that
interested
readers can
find in other
places. It is
a clinically
useful tool

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PDF Contrast

Induced

Nephropathy A

Literature Review

for anybody
interested in
the

field....Given

its concise

but

comprehensive

structure,

this book is a

great resource

for students

and residents

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Nephropathy A

Literature Review

who want to review basic physiology and pathophysiology but also get up-to-date information on diagnosis and therapy. The wide range of topics also makes it a

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Nephropathy A
Literature Review

useful tool
for any
clinicians at

a more senior
level who want
to quickly
review a
particular
subject.

Lastly, due to
its easily
accessible

Bookmark File

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Induced
Nephropathy: A
Literature Review

structure,
patients and
families

seeking

medical

information

also might

find it

useful. 3 Star

s."--Doody's

Review Service

Presented in

Bookmark File

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Induced

the

Nephropathy A

consistent,

Literature Review

easy-to-follow

CURRENT style,

CURRENT

Diagnosis &

Treatment

Nephrology &

Hypertension

offers

incisive,

ready-to-use

Bookmark File

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Induced
Nephropathy A
Literature Review
management
protocols and
valuable

therapeutic
guidelines --
from authors
who are
recognized as
the field's
foremost
authorities.

Accessible,

Bookmark File

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Induced
Nephropathy A
Literature Review
concise, and
up-to-date,
CURRENT

Diagnosis &
Treatment
Nephrology &
Hypertension
features: One-
of-a-kind
clinical
overview of
all major

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Nephropathy A
Literature Review

diseases and disorders,
from end-stage renal disease to primary and secondary hypertension A practical, learn-as-you-go approach to diagnosing and treating renal

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Nephropathy A
Literature Review

disorders and
hypertension
that combines
disease

management
techniques

with the
latest

clinically
proven

therapies Up-
to-date

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Induced
Nephropathy A
Literature Review

coverage of tr
ansplantation
medicine and
need-to-know
interventional
procedures An
important
review of
subspecialty c
onsiderations:
renal disease
in the

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Nephropathy A
Literature Review

elderly,
diabetic
nephropathy,
critical care
nephrology,
and dialysis
Expert
authorship
from prominent
clinicians in
the areas of
kidney

Bookmark File

PDF Contrast

Induced

disease,
Nephropathy A

dialysis, and

hypertension
Literature Review

Contrast-

induced

Nephropathy in

Invasive

Cardiology

Part I: "Serum

Cystatin C

(sCy C)" Part

II: Assessment

Bookmark File

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Induced
Nephropathy A
Literature Review

of changes in
Cystatin C
(CyC) after 48
h post

contrast media
exposure

Pharmacologic
Intervention
for Preventing
Contrast-

induced
Nephropathy

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review
Comparative
Effects of
Different

Contrast Media

Pituitary

Adenylate Cycl

ase?activating

Polypeptide

Prevents Contr

ast?induced

Nephropathy in

a Novel Mouse

Bookmark File

PDF Contrast

Induced

Model

Nephropathy A

Contrast

Literature Review

nephropathy is a major and growing problem. It is the third most common cause of in-hospital acute renal failure and is associated with significant in-hospital mortality, long-term mortality, increased risk of in-

Bookmark File

PDF Contrast

Induced

Nephropathy, A

Literature Review

hospital major
adverse cardiac
events as well as
prolonged hospital
stay and increased
costs of health care.
The first of its kind
to discuss the
potentially mortal
problems with
contrast agent-
induced
nephropathy, this

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PDF Contrast

Induced

important work

focuses on the

challenge of contrast

nephropathy in

patients undergoing

diagnostic and

interventional

procedures in the

cardiac

catheterization

laboratory, such as

coronary and

peripheral

Bookmark File

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Induced
Nephropathy A
Literature Review

angiography,
percutaneous
coronary and
peripheral
interventions.

Bringing together
experts from the
specialties and
subspecialties of
cardiology,
interventional
cardiology, radiology
and nephrology,

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

Contrast-Induced Nephropathy is a useful resource not only for interventional cardiologists but also for other professionals involved in the care of high-risk patients undergoing contrast-associated procedures.

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

This issue of
Interventional
Cardiology Clinics,
guest edited by Dr.
Hitinder Gurm, will
discuss Renal
Disease and
coronary, peripheral
and structural
interventions. This
issue is one of four
selected each year by
the series Editor-in-

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

Chief, Dr. Matthew

Price. Topics

discussed in this

issue will include:

Contrast induced

nephropathy,

Pathophysiology of

CIN, Implications of

Renal disease in

patients undergoing

peripheral arterial

interventions,

Implications of renal

Bookmark File

PDF Contrast

Induced

disease in patients
undergoing A

Structural Review

interventions,

Different types of
contrast media,

Biomarkers of CIN,

Pharmacological

prophylaxis of CIN,

A practical approach

to preventing renal

complications in the

catheterization

Bookmark File

PDF Contrast

Induced

laboratory, and
several other topics.

Literature Review

Contrast-induced
Nephropathy and

Prophylactic

Administration of

Sodium Bicarbonate

with Coronary

Angiography

Contrast-Induced

Nephropathy in

Interventional

Cardiovascular

Bookmark File

PDF Contrast

Induced

Medicine

Nephropathy A

CURRENT

Literature Review

Diagnosis &

Treatment

Nephrology &

Hypertension

Contrast Induced

Nephropathy

Following

Intravenous

Contrast Enhanced

Computed

Tomography

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review
Biomarkers in Acute
Kidney Injury Due
to Contrast Induced
Nephropathy

This book covers all
aspects of out of
operating room
anesthesia and deep
sedation practice.

The practical
aspects of
anesthesia are
emphasized, with

Bookmark File

PDF Contrast

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Nephropathy A

Literature Review

particular stress on management of unanticipated adverse events. A concise, yet comprehensive description of relevant basic sciences is also included. Although the contributors are predominantly North American, essential elements

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PDF Contrast

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of out of OR
practice in countries
other than the USA

are incorporated.

Situations like those
that contributed to
the death of Joan

Rivers are

addressed with

particular emphasis
on their recognition,
prevention and

management. The

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PDF Contrast

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Nephropathy A

Literature Review

importance of safety as the key element in providing anesthesia in remote or unfamiliar areas is highlighted and discussed. A lack of accurate documentation is a major drawback in out of OR

Bookmark File

PDF Contrast

Induced

anesthesia practice

and the reader is

drawn to the

importance of

documentation,

both from a

practical and

medico legal

standpoint. A

separate chapter

deals with research

and future

directions in out of

Bookmark File

PDF Contrast

Induced
Nephronathy A
Literature Review

OR anesthesia. Out
of Operating Room
Anesthesia: A

Comprehensive
Review, is primarily
aimed at all
anesthesia
providers:
anesthesiologists,
nurse anesthetists
and residents.

Specific chapters
such as dental

Bookmark File

PDF Contrast

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Nephropathy A
Literature Review

anesthesia,
anesthesia for ER
procedures and
sedation for
cosmetic
procedures will be
useful as a
reference guide to
physicians exposed
to brief training in
anesthesia during
their non-anesthesia
residency program.

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PDF Contrast

Induced

Contrasted imaging studies are omnipresent

throughout

healthcare and

potentially lead to

severe

complications

including contrast-

induced

nephropathy (CIN)

and/or acute renal

failure (ARF). This

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Nephropathy A

Literature Review

study compares the efficacy of preventive

measures that can be taken to preserve renal function in patients exposed to IV contrast.

Prevention

modalities that were analyzed included the use of N-acetylcysteine

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

(NAC), theophylline,
and hydration with
half normal saline,
isotonic saline, 5%
glucose, and sodium
bicarbonate.

Patients receiving
NAC saw a decrease
in serum creatinine
whether it was used
alone or in
conjunction with
theophylline or IV

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

hydration. In terms
of hydration along
with NAC, isotonic

saline versus
sodium bicarbonate
results did not
significantly differ.
Half normal saline
and placebo failed
to prevent serum
creatinine increases
while sodium
bicarbonate given

Bookmark File

PDF Contrast

Induced

Nephropathy A

Literature Review

alone did prevent
CIN. Several
effective methods
are available to
reduce incidence of
CIN and preserve
renal function, but
careful
consideration has to
be given as to which
is most appropriate
to cater to co-
morbid conditions

Bookmark File

PDF Contrast

Induced

that are often
present.

Nephropathy A

Literature Review

Risk of Contrast-

induced

Nephropathy (CIN)

After Diagnostic

Cardiac

Catheterization and

Percutaneous

Coronary

Intervention Using

Iopromide

INCIDENCE AND

Bookmark File

PDF Contrast

Induced
Nephropathy A
Literature Review

SHORT-TERM
OUTCOME OF CON-
TRAST-INDUCED
NEPHROPATHY IN
1020 ACUTE
ISCHEMIC STROKE
PATIENTS
RECEIVING
MECHANICAL
THROMBECTOMY
AFTER CT-
ANGIOGRAPHY
U00b1 CT-

Bookmark File

PDF Contrast

Induced

PERFUSION
Nephropathy A
Literature Review

Comparative

Effectiveness of

Preventive

Measures

Contrast-induced

Nephropathy and

Nephrogenic

Systemic Fibrosis

Medical

Management of

Neurosurgical

Patients

Bookmark File

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Nephropathy A
Literature Review

Halogens—Advances in Research and Application: 2012

Edition is a
ScholarlyEditions®
eBook that delivers
timely,
authoritative, and
comprehensive
information about
Halogens. The
editors have built H
alogens—Advances
in Research and

Page 173/177

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PDF Contrast

**Induced
Nephropathy A
Literature Review**

Application: 2012

Edition on the vast
information

databases of

ScholarlyNews.□

You can expect the
information about
Halogens in this
eBook to be deeper
than what you can
access anywhere
else, as well as
consistently
reliable,

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Induced

authoritative,
informed, and

relevant. The Review

content of Halogen

s—Advances in

Research and

Application: 2012

Edition has been

produced by the

world's leading

scientists,

engineers,

analysts, research

institutions, and

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Nephropathy A

Literature Review

companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited by the editors at ScholarlyEditions[®] and available exclusively from us. You now have a source you can cite with authority,

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Nonhypopathy A

Literature Review

confidence, and
credibility. More
information is
available at [http://
www.ScholarlyEditions.com/](http://www.ScholarlyEditions.com/).