PRONOSTIC VALUE OF URINE NGAL (Ungal) and IL18 (UIL18) IN CRITICAL ILL PATIENTS AT THE ADMISSION TO AN INTENSIVE CARE UNIT (ICU)

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INTRODUCTION AND AIMS: Acute Kidney injury (AKI) in ICU is common and tightly associated with mortality. NGAL and IL18 are promising biomarkers for early AKI detection. However the comparative performance of uNGAL and U II18 remains to be validated.

AIMS: To estimate the diagnostic accuracy of uNGAL and II18 at the admission to an adult general ICU for early detection of AKI,

METHODS:

<u>STUDY</u>: We conducted a prospective observational study of 302 consecutive adult patients admitted to a general ICU in HU Princesa. The study was approved by the institutional review board. Informed consent was obtained from patient surrogate. AKI was defined by KDIGO criteria

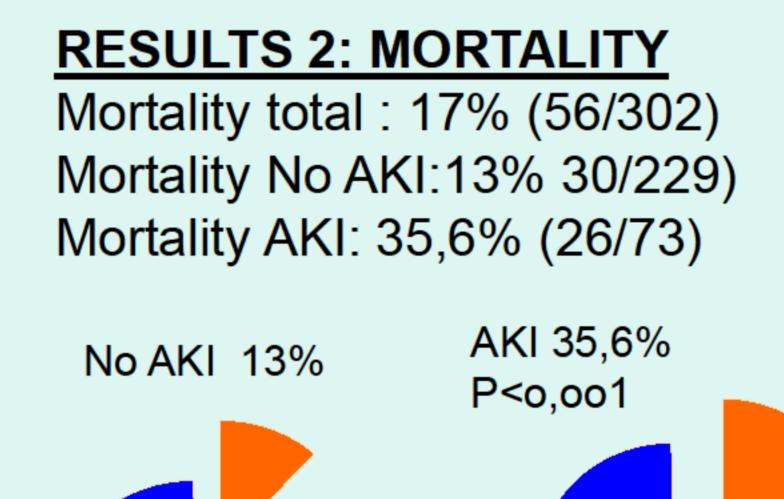
Patients were follow up 30 days until ther discharge from hospital or their death

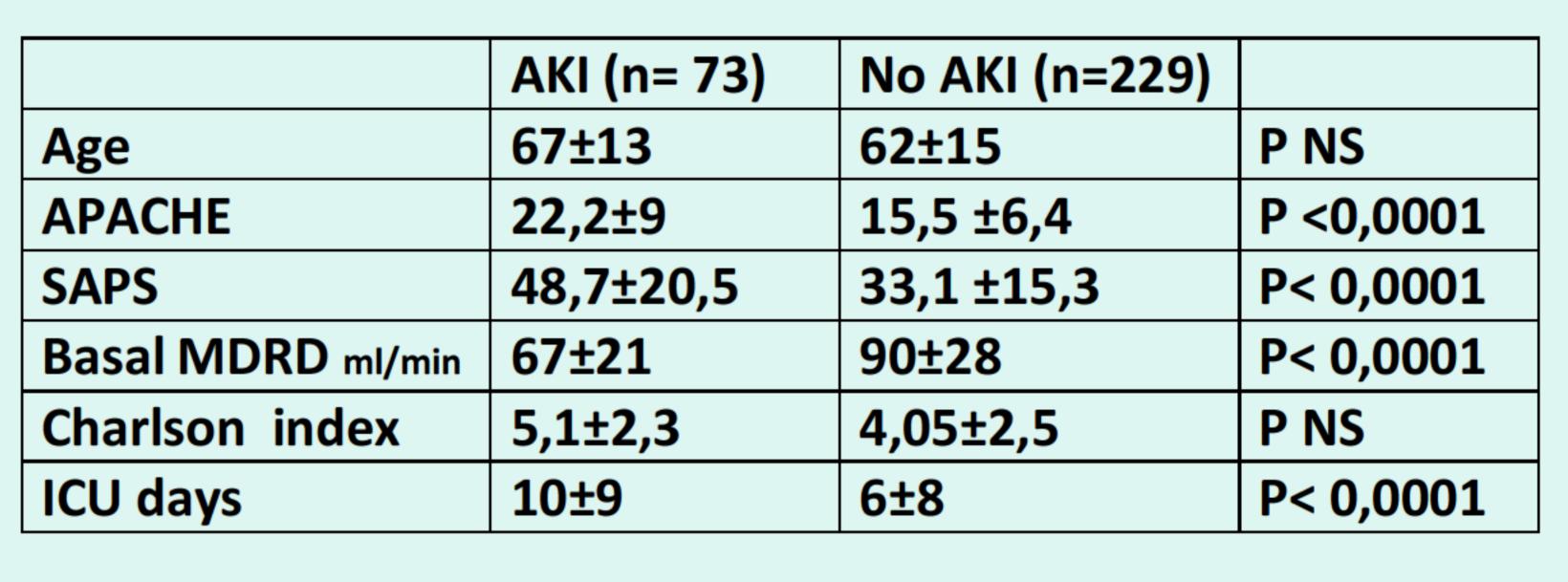
Clinical information: sex, age, cause of admission, APACHE, SAPS index, AKI, need RRT, Charslson index, need of RRT Samples: uNGAL, u IL18 at the admission in the ICU. Creatnine daily till 96h, weekly and discharge creatinine.

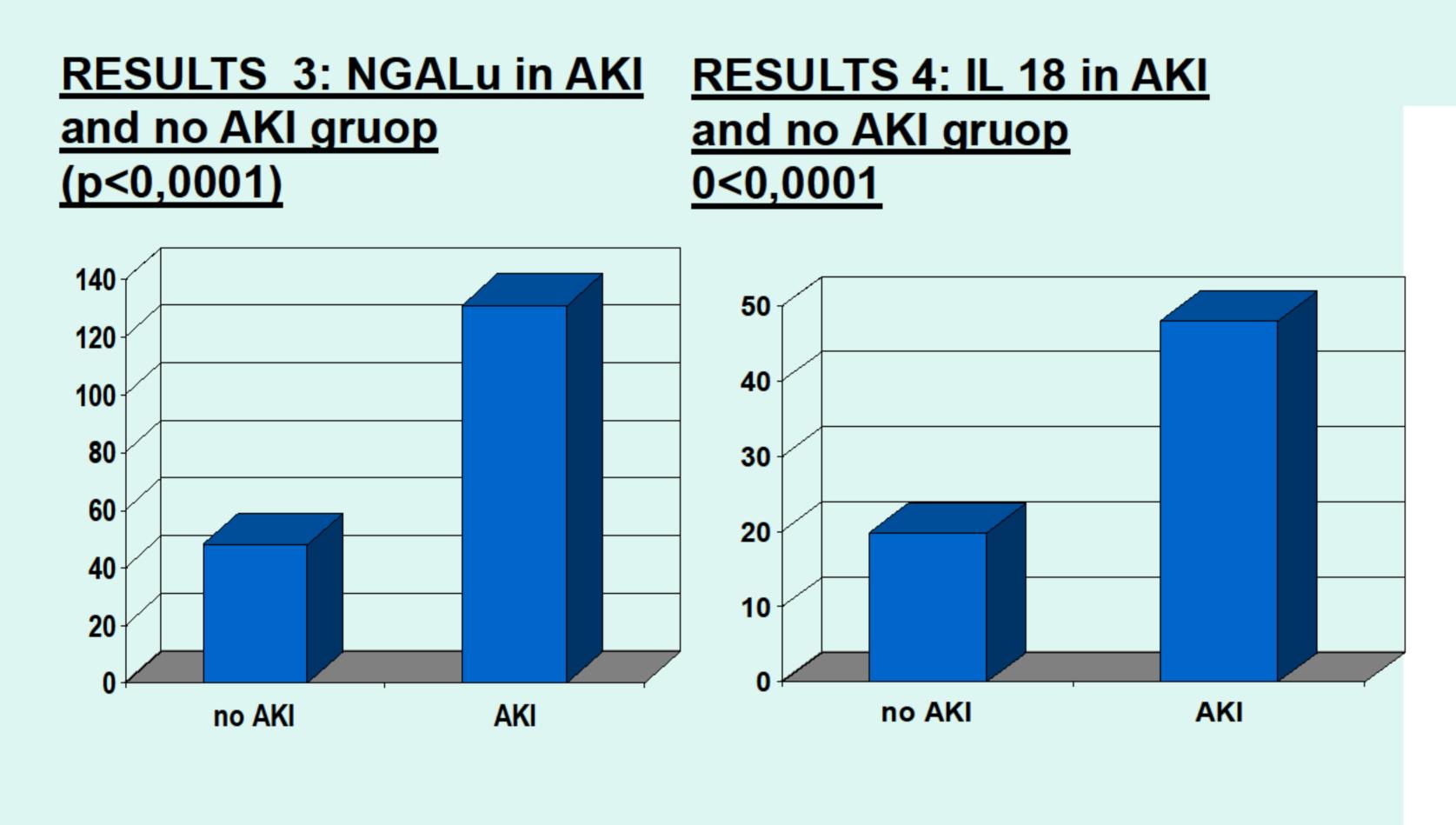
NGAL was done by standarized clinical Platform ATCHITECT assay(Abbott). IL 18 was made by ELISA(Human IL-18 instant NN267 **Statistical analysis:** Spss 17 was used . Diagnostic characteristic of uNGAL and IL18 were evaluated with receiver –operating characteristic (ROC) curves for AKI diagnosis.

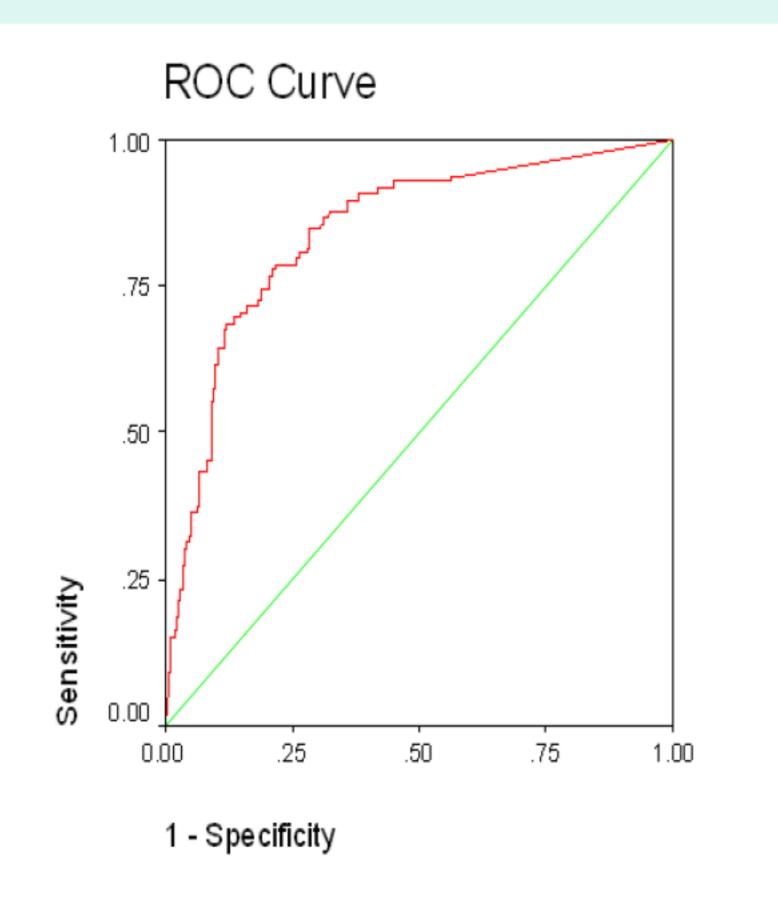
RESULTS

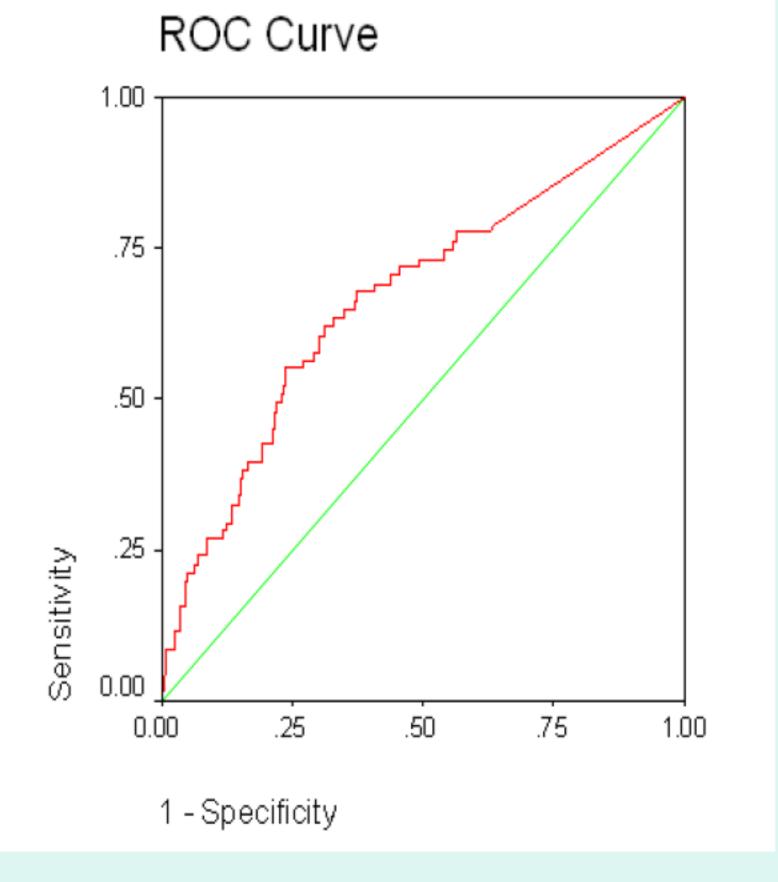
RESULTS 1: AKI INCIDENCE AKI Incidence 24%(73/302) RRT:5,6%(17/302)











RESULTS 5: ROC curves
5-1-ROC curve for basal NGALu at admission and AKI occurrence 0.79 (IC 0.74 a 0.84) p<0.001

5-2- ROC curve for II18 and AK I ocurrence 0.69 (IC 0.62 a 0.76) p<0.001

CONCLUSIONS

Urine NGAL and IL 18 in urine at admission in ICU can predict AKI, but in our experience ROC curve for NGAL is superior







