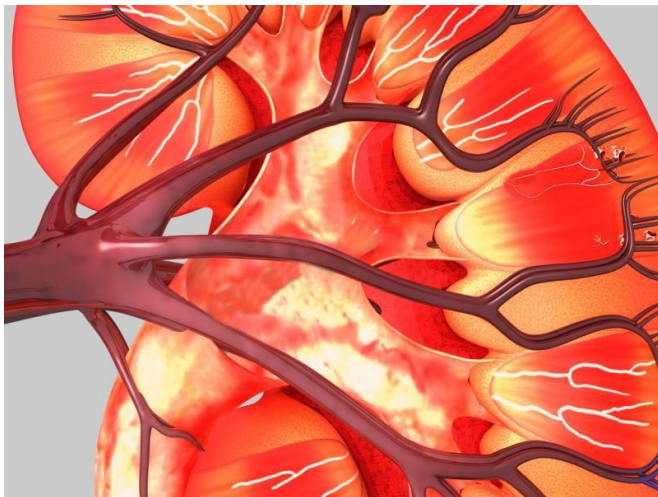


Acute kidney injury ups risk for post-discharge hypoglycemia

18 January 2018



no recovery, respectively, compared to patients without AKI. Patients with versus those without AKI experienced hypoglycemia more frequently across all anti-diabetes drug regimens; hypoglycemia incidence was highest for insulin users, followed by glyburide and glipizide users.

"AKI is a risk factor for hypoglycemia in the post-discharge period," the authors write. "Studies to identify risk-reduction strategies in this population are warranted."

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

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(HealthDay)—For hospitalized patients with diabetes, acute kidney injury (AKI) is a risk factor for post-discharge hypoglycemia, according to a study published online Jan. 11 in *Diabetes Care*.

Adriana M. Hung, M.D., from Veterans Affairs Tennessee Valley in Nashville, and colleagues performed a propensity-matched analysis of [patients](#) with diabetes, with and without AKI, using a retrospective cohort of veterans hospitalized between 2004 and 2012. The authors compared the risk for [hypoglycemia](#) within 90 days post-discharge among hospitalized patients with diabetes with and without AKI.

The researchers identified 65,151 propensity score-matched pairs with and without AKI. Per 100 person-years, the incidence of hypoglycemia was 29.6 and 23.5, respectively, for patients with and without AKI. AKI correlated with an increased risk of hypoglycemia after adjustment (hazard ratio, 1.27). The hazard ratios were 1.18, 1.30, and 1.48 for patients with full recovery, partial recovery, and

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