

SUMMARY OF PATHOLOGY LECTURE 1: AKI

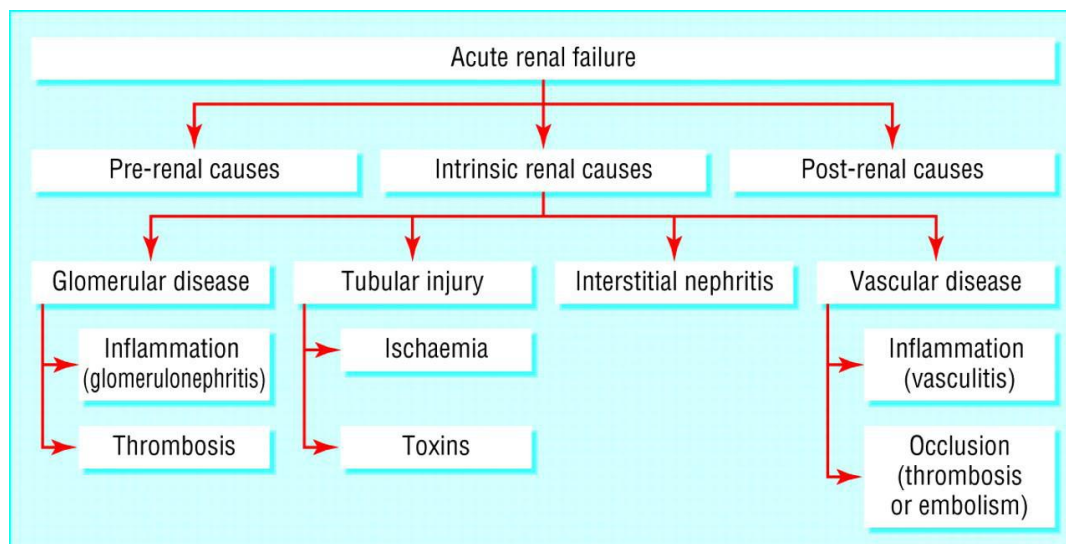
- Biopsy Should be **adequate** to diagnosis (كمية كافية)
- In a Kidney biopsy there are **4 elements** to look at:
Glomerulus, tubules, interstitium, blood vessels
- Ex.: لازم نعرف بعض الأمراض المتعلقة بكل واحد من هذه العناصر

1. **Tubules**: Necrosis due to different causes, "myeloma cast nephropathy" (we see casts in tubules) & this 2nd ex. Indicates AKI if the casts fill and block the tubules
2. **Blood vessels**: (inflammation of blood vessels) Acute Vasculitis with fibrinoid necrosis >>> indicates AKI coz of decreased blood supply to the kidneys (ischemia)
3. **Glomeruli**: Crescentic Glomerulonephritis >>> Major clinical syndrome indicating AKI
we'll talk about it in details later in another lecture, that's why don't concentrate much on it now ;)
4. **Interstitium**: edema, acute inflammation >>> high creatinine levels >>> AKI
 - **AKI could be due to:**
 1. Drug toxicity – Proximal Tubules are the most affected part (VERYYYY IMPORTANT !!!!)
 2. Bleeding (Ischemia) – Serum Creatinine is high

*** Acute tubular Necrosis is the MOST FREQUENT in AKI •

يعني في ال diagnosis of AKI , أول شيء أبحث عنه هو ATN

- **Pathophysiology** of AKI >> أهم شيء تفهموا المخطط هذا، إذا عرفتموه يكفي
- Acute Renal Failure is now called Acute Kidney Injury -



- **Pathological findings** is for the practical more than the theory ;) we should know how the tubules could look like and the necrosis etc. لأنه عبارة عن صور

N.B: I reviewed this with Dr.Kfoury. **it's just a summary** of what the doctor stressed on, not enough to study from .. team handouts are our main source, & the doctor strongly suggested to study from ;) so just review this after studying the handouts.

Another thing, what I highlighted – in my own opinion – I think it's an MCQ .. coz the doctor said it's VVVVV. IMPORTANT ! =)