

JOINT EVENT

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ENDOCRINOLOGY AND METABOLIC SYNDROME
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Acute renal failure due to anabolic steroid or creatinine supplement**Moayed Alhelfi and Massimo Piracci**

Medeor 24x7 International Hospital, United Arab Emirates

The case study begins with a 43-year-old bodybuilder trainer male presented with left knee injury he scheduled for arthroscopy, as part of pre-procedure investigations he found to have creatinine of 184.8 $\mu\text{mol/l}$ (2.07 mg/l) eGFR 29 and Urea was normal, normal electrolyte. He has no past medical history apart from L knee twisting his knee trauma four months ago. He has no GI issues and has normal bowel and bladder habits. He was using anabolic injection last two months in form of Nebido injection (testosterone), injection every three months for the last two years. He is also taking creatinine supplement of creatine (10 g/day) products. No drug history and he is non-smoker, non-alcoholic. His father has T2DM at age of 40 and has ESRD on dialysis at age of 55 and died at age of 60. His mother has no past medical history. Subsequently patient was admitted to the hospital arrange him to have urgent USS abdomen, and auto-immune screening. USS no abnormality, and autoimmune was negative. He received IVF and stopped the supplement and advised against using anabolic steroid, his eGFR improved to 36 Cr 1.86 mg/l, the procedure deferred as high risk of complication. Acute renal impairment has been reported with people taking both creatinine and anabolic steroid, without biopsy we couldn't rule out the actual reason behind this impairment, as might be as pseudo-acute renal failure especially true with normal level of S Urea. It might be the best interest too. We think it is the time for wide public awareness of this kind of behavior. It might need further research or study to support if using anabolic steroid or creatinine supplement causing renal failure in this cohort of patients.

Biography

Moayed Alhelfi has received his Certificate of Completion of Training (CCT) after completing his training in Diabetes and Endocrinology at Northwest of England in different tertiary centers in Manchester. He has a strong passion for Medical teaching, has a PGC in teaching at Medical work place. He published several publications in different conferences around the world. His special interest is Andrology and Men's Health.

alhelfi@doctors.net.uk

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