Acute Glomerulonephritis Interventions

Acute glomerulonephritis develops suddenly and is often the result of an infection. Prevention of acute glomerulonephritis includes early diagnosis and treatment of sore throats and skin lesions. Interventions for acute glomerulonephritis may include promoting rest, restricting salt and fluid intake, and restricting protein depending on the severity of the disease process. Drug therapy includes the administration of antihypertensives, diuretics, or antibiotics. In most cases, recovery from acute glomerulonephritis is complete, however, progressive involvement can lead to chronic conditions or the development of end stage kidney disease.



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Rest
Bed-rest
Promoting rest and limiting activities is encouraged until the signs of glomerular inflammation and hypertension are relieved.

Restrict Salt and Fluid Intake
Restrictive-belt on Salt-shaker with Fluid
Restriction of salt and fluid intake can help in treating the symptom of edema. Be sure to monitor I&Os and perform daily weights for the most accurate detection of fluid status.

Restrict Protein
Restrictive-belt on Mr. Protein
The restriction of dietary protein may be initiated depending on the degree of proteinuria and the increase in nitrogenous wastes shown by the BUN level.

Antihypertensives
Ant-tie-hiker-BP
Antihypertensive drugs may be administered in cases of severe hypertension.

Diuretics
Die-rocket
Administration of diuretics aid in treating symptoms of edema and hypertension.

Antibiotics
ABX-guy
In the event that a streptococcal infection is still present, antibiotics may be given.

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