Dear Editor,

We read with interest the recently published article by Ardalan et al. [1] in Medical Principles and Practice entitled ‘Erythropoietin ameliorates oxidative stress and tissue injury following renal ischemia/reperfusion in rat kidney and lung’. They showed that erythropoietin (EPO) pretreatment could be effective in reducing renal and lung injury following renal ischemia/reperfusion and could improve the cellular antioxidant defense system. We congratulate them for their work; however, we would like to point out some other aspects of kidney-protective effects of erythropoietin. Intraperitoneal administration of EPO after gentamicin administration (100 mg/kg) reversed the increased serum creatinine and blood urea nitrogen [2]. This indicates that EPO may have curative properties, besides its preventive effects. Furthermore, coadministration of gentamicin and EPO effectively reduced kidney tissue damage compared to the control group, as described by Ardalan et al. [1] and others [2–4]. It has been shown that EPO may have curative properties other than its preventive effects [2] and may also have a protective effect against cisplatin-induced nephrotoxicity [5]. Hence, EPO could be a renoprotective drug against tubular damage induced by gentamicin or other nephrotoxic agents [2–5].

Disclosure Statement
The authors declare no competing interests.

References

Editor’s note: the authors were asked to respond to this letter but they declined.