	Parameters at the time of RRT		
Study	Early RRT	Late RRT	Outcome
Bagshaw et al. ; prospective study	Serum creatinine ≤ 309 µmol/l; serum urea ≤ 24.2 mmol/l	Serum creatinine > 309 μmol/l; serum urea > 24.2 mmol/l	Hospital mortality, 71 versus 53.4%, p < 0.00001
Shiao et al. ; prospective study	AKI as per RIFLE classification; no AKI or RIFLE Risk	AKI as per RIFLE classification; RIFLE Injury or Failure	Hospital mortality, 43 versus 75%, p = 0.002
Chou et al.; retrospective study	RIFLE-o or RIFLE-Risk	RIFLE-Injury or RIFLE-Failure	Hospital mortality, 70.8 versus 69.7 %, p > 0.05
Liu et al.; prospective study	Serum urea < 27.1 mmol/l	Serum urea > 27.1 mmol/l	Hospital mortality, 35 versus 41%, p=0.09
Gettings et al.; retrospective study	Serum urea < 21.4 mmol/l	Serum urea > 21.4 mmol/l	Hospital mortality, 61 versus 80%, p = 0.041
Elahi et al.; retrospective study	Urine output < 100 ml in 8 h	Serum urea \geq 30 mmol/l or serum creatinine \geq 250 μ mol/l or $K^+ > 6$ mmol/l	Hospital mortality, 22 versus 43%, p < 0.05
Bouman et al.; RCT	Urine output < 30 ml/h for 6 h and creatinine clearance < 20 ml/min	Serum urea > 40 mmol/l or K+ > 6.5 mmol/l or severe pulmonary edema	28-day mortality, 29 versus 25%, $p = 0.8$
Demirkilic et al.; retrospective study	Urine output < 100 ml within 8h post-surgery	Serum creatinine > 440 μ mol/l or K+ > 5.5 mmol/l	Hospital mortality, 23.5 versus 56%, p = 0.016
Sugahara et al.; RCT	Urine output < 30 ml/h for 3h	Urine output < 20 ml/h for 2h	14-day mortality, 14 versus 86%, p < 0.01

Table 1 Literature overview: The ELAIN-trial was planned based on these findings. The mortality rate in the late group was estimated 55%. The reduction of 18% is calculated on the mortality difference between the early and the late group, which results in a difference of 17.9778% favoring the early group.