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NON-TRADITIONAL RISK FACTORS PREDOMINATE IN HEMODIALYSIS PATIENTS WITH PRE-EXISTING CARDIOVASCULAR DISEASE

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OBJECTIVES

There are uncertainties regarding risk factors for cardiovascular events and all-cause mortality in hemodialysis patients with pre-existing cardiovascular disease. We assessed possible associations in a post hoc analysis of the Aurora trial

METHODS

AURORA was a randomized, double-blind placebo-controlled study to investigate the effect of rosuvastatin on cardiovascular outcomes and mortality in established hemodialysis patients.

Patients with established cardiovascular disease at the start of the follow-up study were selected in our study. We evaluated association between baseline risk factors and all-cause mortality in this population.

Cox-regression was used to identify potential associations between risk factors at baseline and all-cause mortality during long term follow-up.

RESULTS

In total, 1313 patients with median age of 66years, at baseline were available for analysis.
During a median follow-up of 4.0 years, there were 426 deaths.

In multivariate analysis:
All-cause mortality was significantly associated with:
Age (HR 1.02, CI 1.01-1.04), **Phosphate** (HR 1.37 CI 1.02 -1.63) , **Albumin** (HR 0.95 CI 0.93-0.97) , **hsCRP** (HR 1.12 CI 1.03-1.21), **Diabetes** (HR 1.4 CI 1.16-1.72), **Dialysis vintage**(HR 1.02 CI 1.00 – 1.05)

*There were no significant associations for **smoking, hemoglobin, BMI and gender**.*

	Age	Phosphate	Albumin	hsCRP	Diabetes	Dialysis vintage
All-cause **mortality (HR)**	1.02	1.37	0.95	1.12	1.4	1.02

CONCLUSIONS

Non-traditional cardiovascular risk factors are predominant in dialysis patients with pre existing cardiovascular disease

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