

# Serum sclerostin levels are associated with aortic valve calcification in maintenance haemodialysis patients

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## OBJECTIVES

Sclerostin is a protein expressed by osteocytes and has been shown to be a good predictor for bone formation in patients with chronic kidney disease.

Sclerostin was only recently identified in the subendothelial layer of the human aortic intima, suggesting a possible role in the pathogenesis of aortic valve calcification (AVC).

The aim of this study was to evaluate the relationship between serum sclerostin levels and AVC in maintenance haemodialysis patients.

## METHODS

101 patients (48 females and 53 males, mean age: 59±12 years, mean haemodialysis vintage: 56±28 months) were included in a cross-sectional study. Serum sclerostin levels were measured by ELISA (R&D Systems, Minneapolis, MN). All patients underwent unenhanced, electrocardiography-triggered dual-source computed tomography of the heart.

## RESULTS

Patients with AVC showed significantly higher serum sclerostin levels as compared to patients with no calcified aortic valves (2813±1171 vs 1362±1190 pg/mL,  $p<0.001$ ).

The patients are grouped according to quartiles of serum sclerostin levels as follows: 1st quartile (25): serum sclerostin levels ≤370 pg/ml; 2nd quartile (25-75): 370 < serum sclerostin levels < 2282 pg/ml; 3rd quartile: serum sclerostin levels ≥2282 pg/ml.

The frequencies of AVC were 36% (5 in 14 cases), 58% (30 in 52 cases) and 94% (33 in 35 cases), respectively ( $p<0.0001$  for the trend).

In the multivariable regression analysis, age ( $B=0.46$ ,  $p=0.015$ ) and serum sclerostin levels ( $B=0.35$ ,  $p=0.044$ ) were independent factors for AVC.

## CONCLUSIONS

Further studies are needed to identify sclerostin as a pathogenetic factor or a suitable biomarker or a therapeutic target for AVC in maintenance hemodialysis population.

## REFERENCES:

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