

PREVALENCE AND RISK FACTORS FOR CHRONIC KIDNEY DISEASE AMONG HIV-INFECTED PATIENTS: RESULTS FROM A PORTUGUESE CENTER



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INTRODUCTION AND AIMS

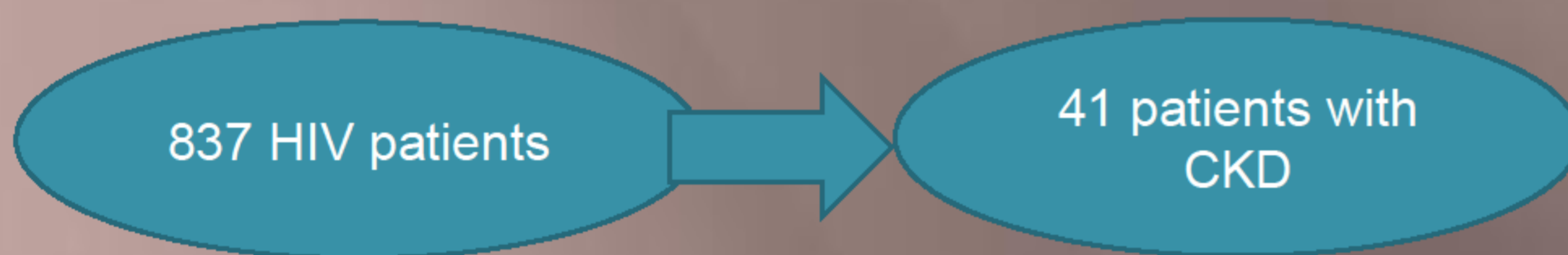
As HIV-infected patients live longer with antiretroviral therapy (ART), chronic kidney disease (CKD) becomes a more frequent reality in these patients.

The aim of this study was to evaluate the prevalence and risk factors for CKD among HIV-infected patients, followed in a specialized consultation in a Portuguese central hospital.

METHODS

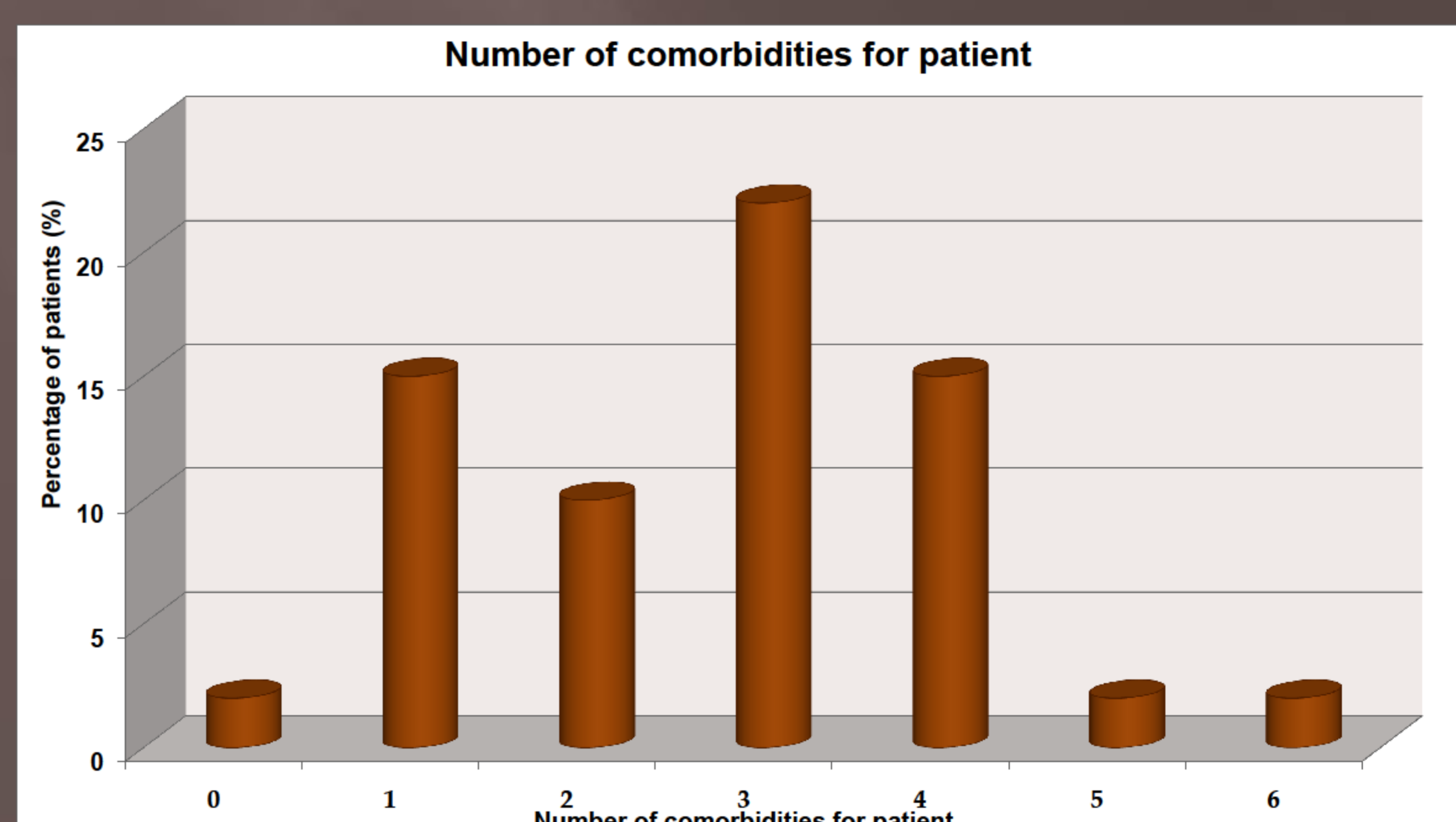
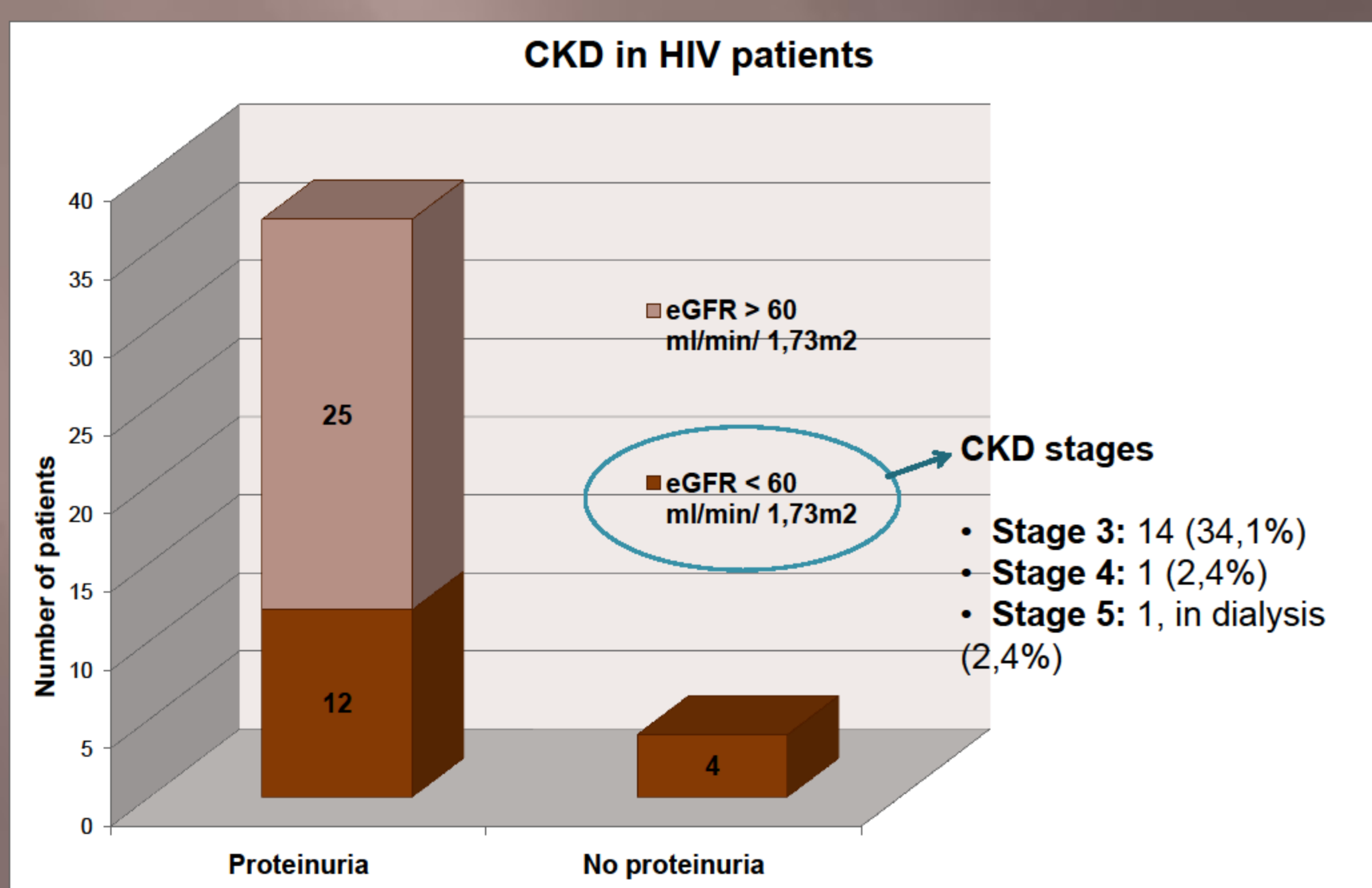
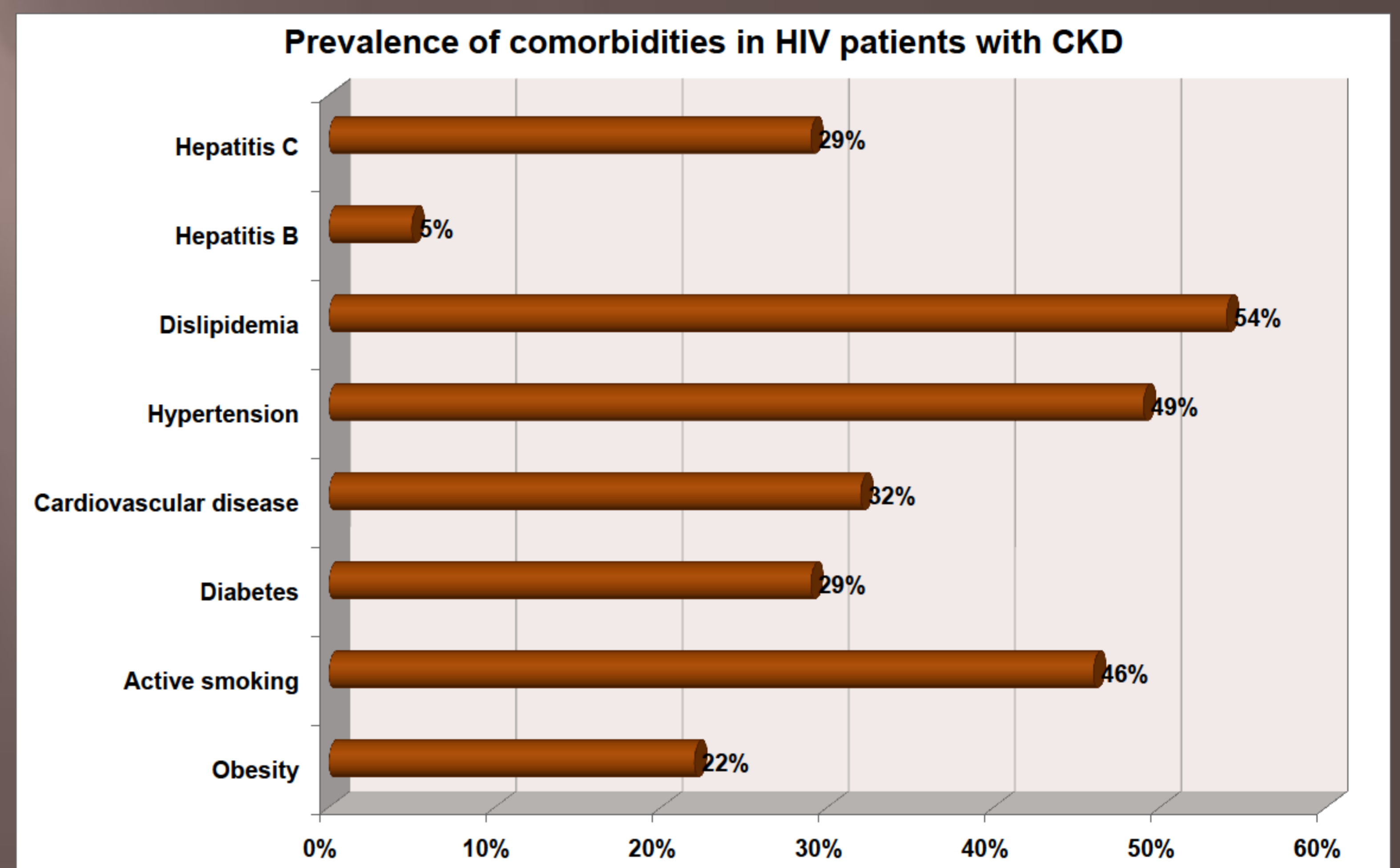
- Retrospective study.
- Glomerular filtration rate (GFR) was calculated using the Modification of Diet in Renal Disease (MDRD) equation.
- CKD was defined as GFR < 60 ml/min per 1,73m² and/or proteinuria on urine dipstick on at least two evaluations separated by a minimum of 3 months.
- Patients with CKD were selected and data concerning risk factors of CKD was retrospectively collected from medical records.

RESULTS:



HIV patients with CKD: Characteristics

Total number of patients	41 (5,8%)
Age (average)	57 years (12 years)
Men	39 patients (95,1%)
Type of VIH	100% type 1
ART	40 patients
CD4 cells count (average)	475/ul
Indetectable viral load	71%



CONCLUSIONS

- CKD is prevalent in this center.
- As HIV-infected patients live longer, important comorbidities as hypertension, dyslipidemia, obesity, cardiovascular disease and diabetes become more frequent and, as in the general population, they become potential risk factors for renal disease.
- Screening and control of these risk factors and routine screening for CKD are essential in these patients.

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