Ultrafiltration Volume and Fibroblast Growth Factor 23: a Possible Link Between Volume Homeostasis and Phosphate Metabolism in Hemodialysis Patients.

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INTRODUCTION

•Fibroblast Growth Factor 23 (FGF23) is associated with increased risk of heart failure and mortality in CKD

- •FGF23 correlates with volume markers in transplant recipients¹
- A recent study linked FGF23 with sodium/volume homeostasis²
- •In hemodialysis (HD), a ultrafiltration volume is associated with an increased risk of heart failure and mortality³

AIMS

1. Are circulating FGF23 levels and ultrafiltration volume related in a cohort of stable HD patients?

METHODS

Post-hoc analysis on a prospective cohort study in 109 HD patients. Blood samples drawn at 0 hours of the first, standard four-hour HD session of the week.

Measurements: plasma C-terminal FGF23 (ELISA). We used linear regression to assess the association between ultrafiltration volume and FGF23. (Ln)-transformation was applied when appropriate.

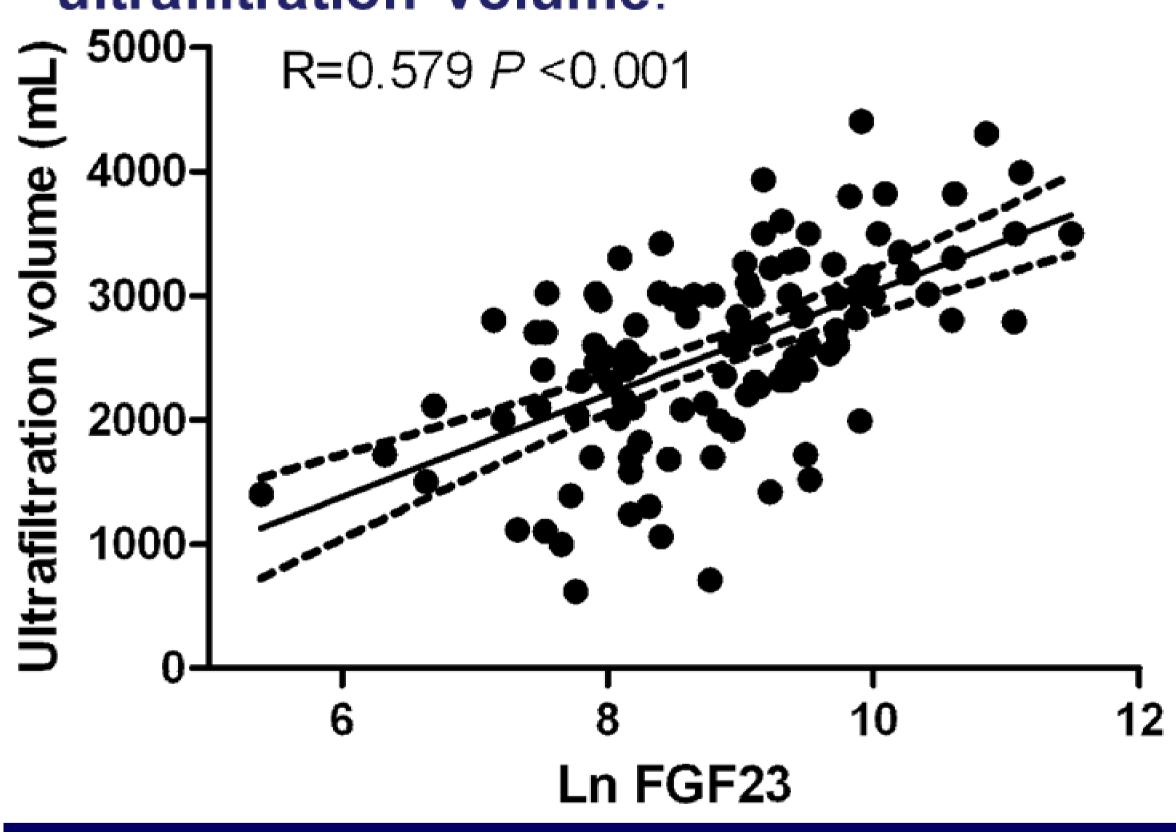
RESULTS

Table 1. Baseline characteristics of the cohort

Parameter	Value
Patients (n)	109
Age (years)	66 [51-75]
Gender, male (%)	71 (65.1%)
Dialysis vintage, months	25.4 [8.5-52.5]
FGF23, RU/mL	7627 [3300-13514]
Phosphate, mmol/L	1.70 ± 0.54
Calcium, mmol/L	2.31 ± 0.16
Copeptin	142 [91-245]
Residual Renal Function ≥1 mL/min, %	35 (32.1%)
Residual Diuresis ≥ 200 mL/d, %	39 (35.8%)
Ultrafiltration Volume, (mL)	2553 ± 777

Data presented as mean ± SD, median [1st-3rd quartile] or number (percentage), where appropriate

Figure 1: FGF23 strongly correlates with ultrafiltration volume.



Figures 2 & 3. Relation of FGF23 and ultrafiltration volume appears to be independent from serum phosphate levels.

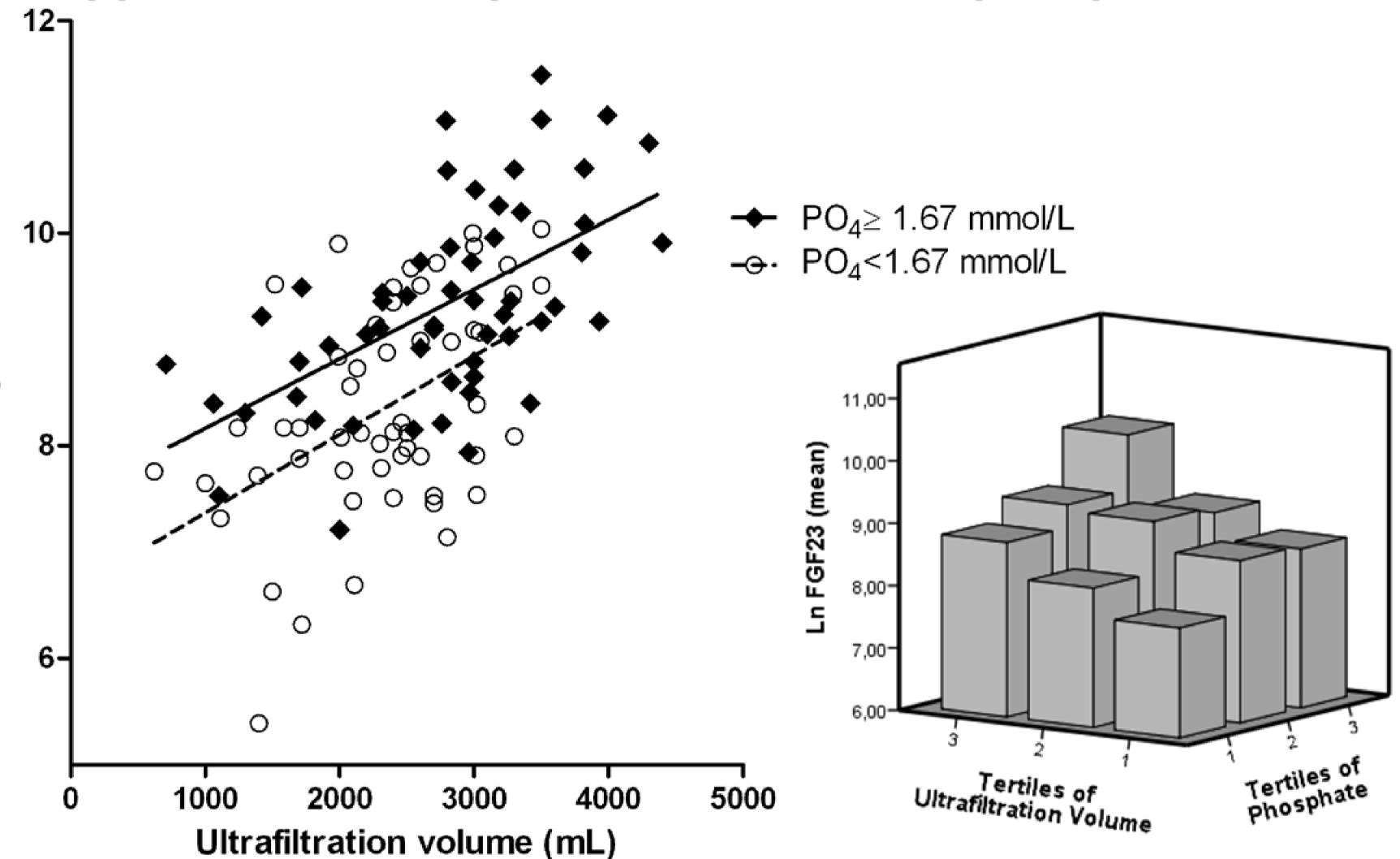


Table 2: Determinants of Ln FGF23 in multivariate regression analysis

Covariate	St. β	<i>P</i> -value	R ²
Calcium	0.225	0.001	52%
Phosphate	0.439	<0.001	
Ultrafiltration Volume	0.391	< 0.001	

Age, gender, dialysis vintage, Kt/V, systolic and diastolic blood pressure, residual renal function and diuresis did not contribute to the model.

CONCLUSIONS

In a cohort of stable HD patients, FGF23 is associated with ultrafiltration volume independent of serum phosphate and calcium levels. Possibly, exaggerated sympathetic nerve activation stimulates FGF23 release from bone⁴ in patients with more pronounced volume overload. The connection between deranged volume status and phosphate homeostasis requires further mechanistic studies.

REFERENCES:

- 1) Baia LC Clin J Am Soc Nephrol. 2013;8(11):1968-1978.
- 2) Andrukhova O. EMBO Mol Med. 2014.
- 3) Flythe JE. Clin J Am Soc Nephrol. 2013;8(7):1151-1161.
- 4) Kawai M. J Biol Chem. 2014;289(3):1457-1466.



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