

# ASSOCIATION OF FETUIN GENE POLYMORPHISMS WITH CORONARY ARTERY CALCIFICATIONS AND MORTALITY IN RENAL TRANSPLANT AND CHRONIC KIDNEY DISEASE PATIENTS

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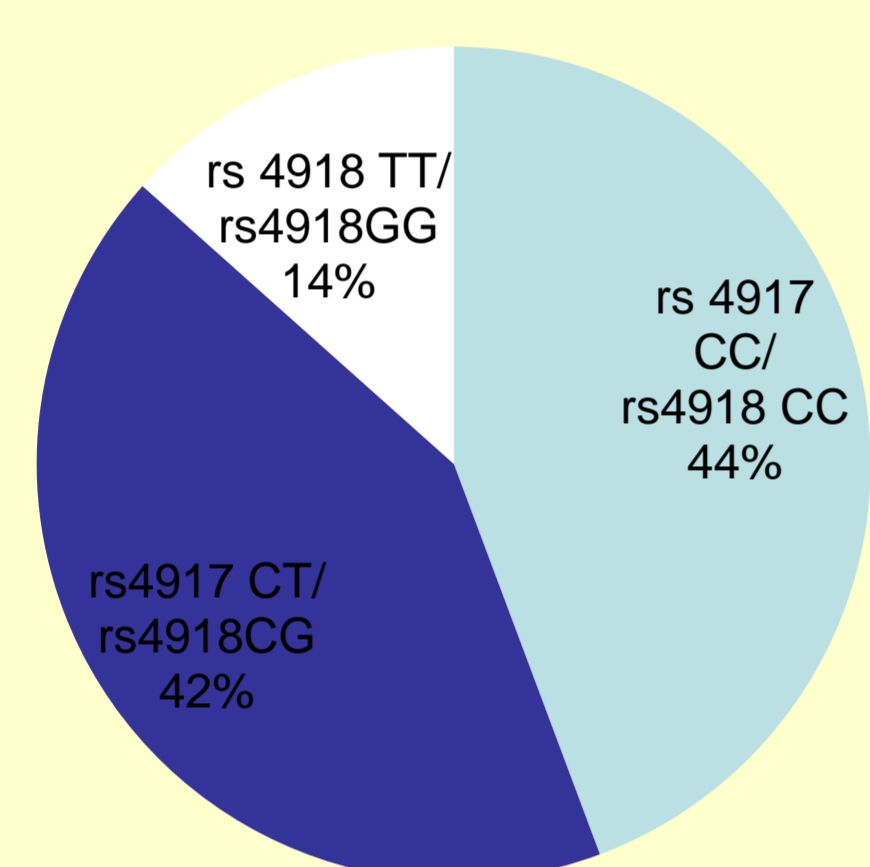
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## Objectives:

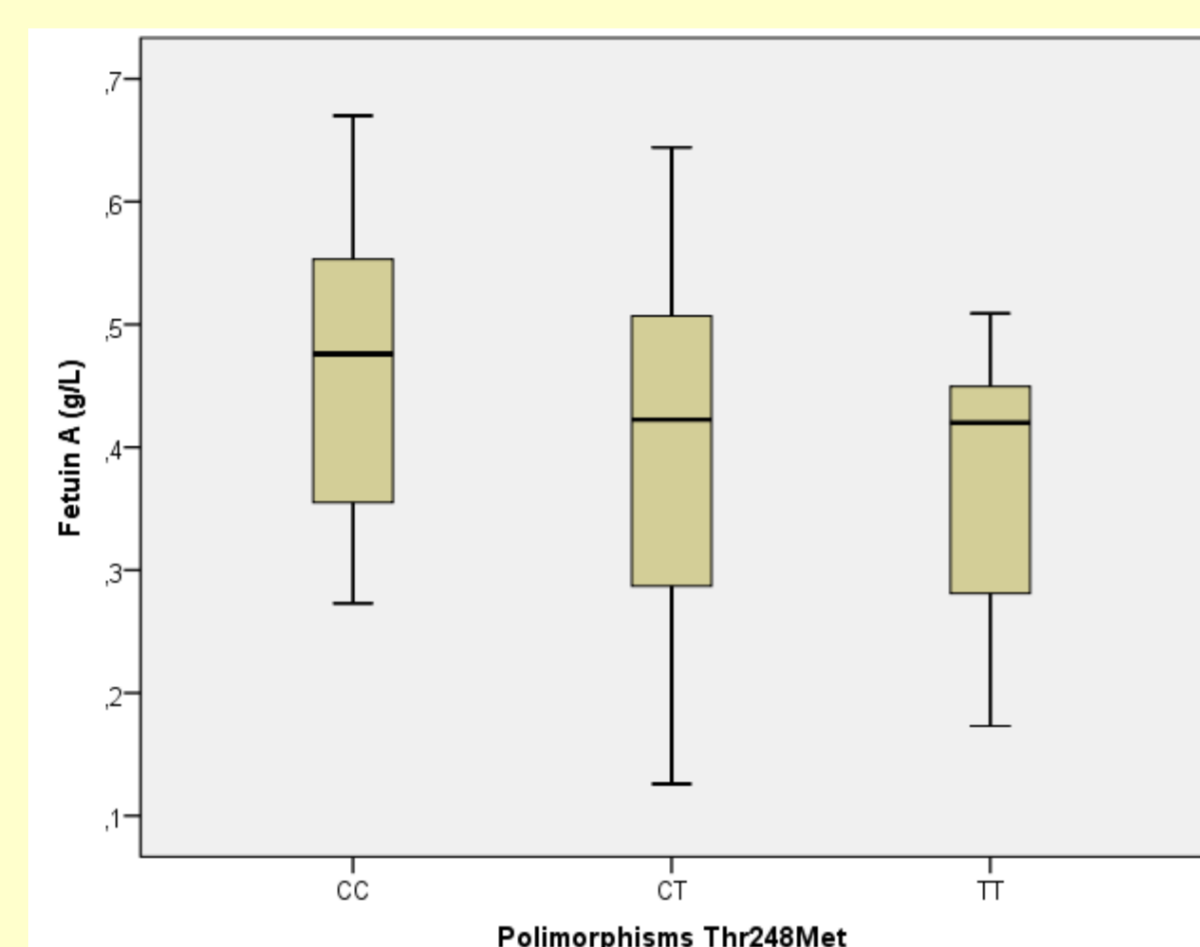
The present prospective study evaluated the association of single nucleotide polymorphisms in the genes for fetuin-A: Thr248Met C>T (rs4917) and Thr256Ser C>G (rs4918) with fetuin-A serum levels, coronary arteries calcification (CAC) and mortality in renal transplant (RT) and chronic kidney (CKD) patients.

## Methods:

**METHODS:** During the period of 72 months 97 patients, regularly monitored at Clinic of nephrology CCS, were examined (49 stable RT patients, 31 males, at least 6 months after transplantation and 48 CKD patients, 25 males, stage 2-5 not requiring dialysis). Demographic (age and gender), clinical (dialysis and transplant duration, BMI, hypertension) parameters and serum creatinine, high sensitive C reactive protein (hs-CRP), interleukin-6, serum amyloid A, as well as fetuin-A (ELISA Epitope Diagnostics, Inc., San Diego, California, USA) concentration were determined. CAC score was evaluated using multi-detector row spiral computed tomography (MSCT). Detection and analysis of single nucleotide polymorphisms SNP were performed using PCR method.



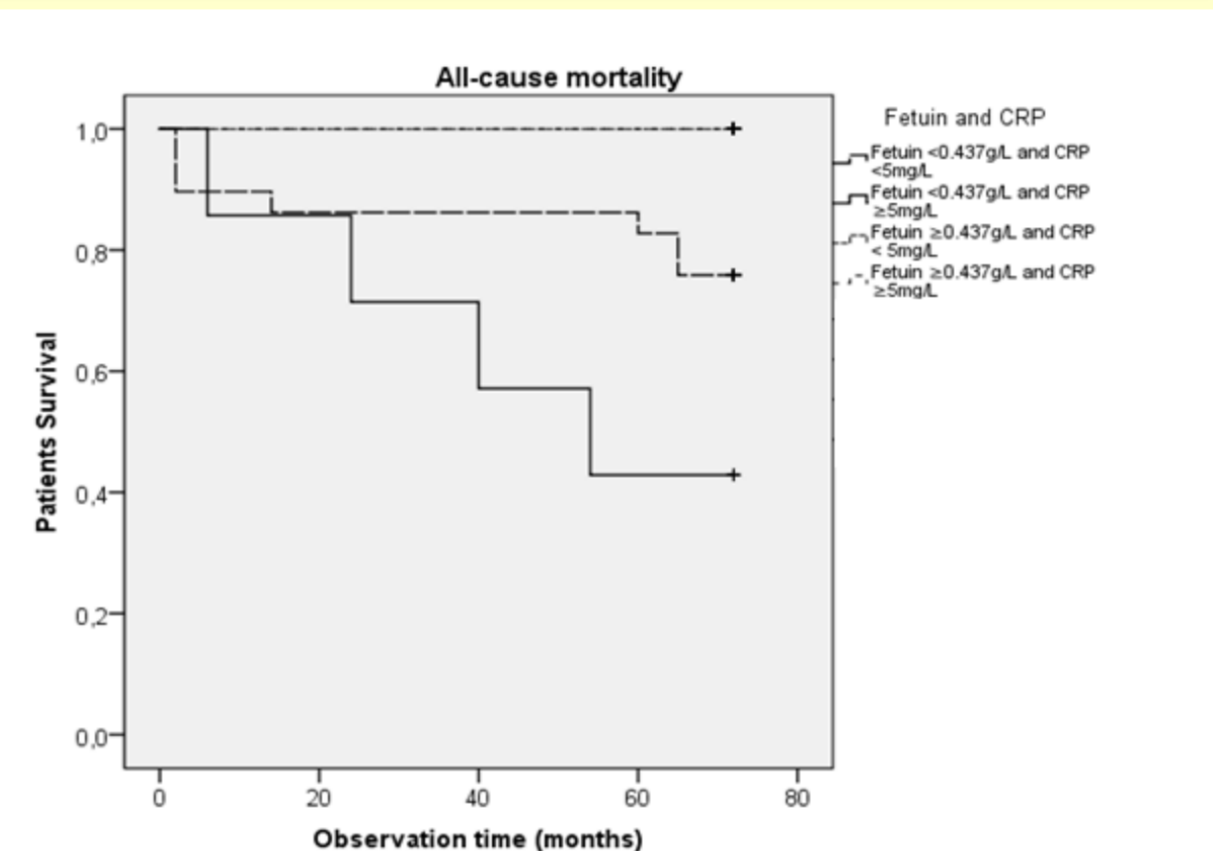
Graph. 1. Distribution of genotypes rs4917 and 4918



Graph. 2. Serum fetuin A levels according rs4917 genotypes

Tab.1 Logistic univariate analysis with presence of CAC as dependent variable

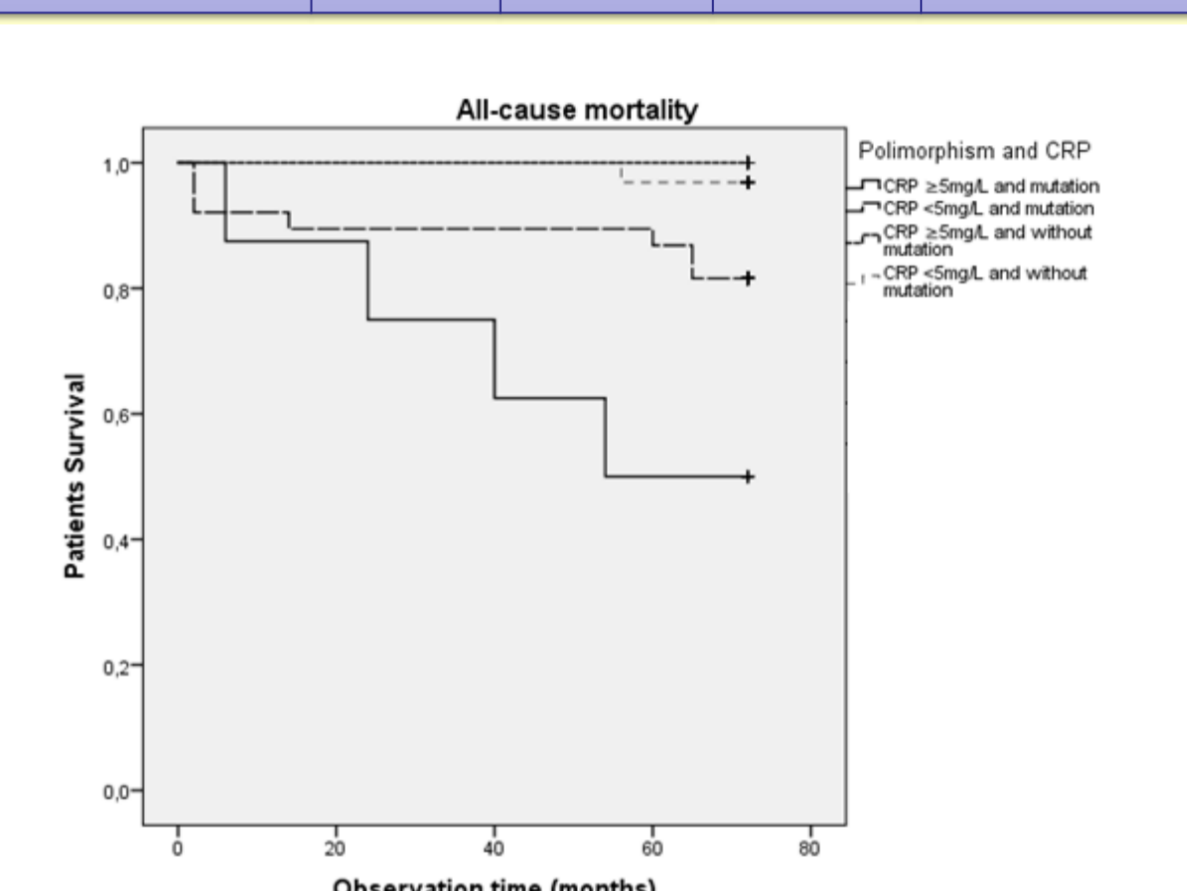
Varijable	p	Exp(B)	OR	95% CI Exp(B)
Age	0.000	1,156	1.17	1.09-1.24
Fetuin-A	0.011	3,238	4.77	1.31-8.01
Rs 4917	0.021	2.801	1.16	1.17-6.69



Graf.3. Kaplan-Meier analysis - influence of serum fetuin A and inflammation on mortality

Tab.2 Logistic multivariate analysis with presence of CAC as dependent variable

Variable	B	p	OR	OR 95% CI
Age	0.15	0.001*	1.17	1.09-1.24
Fetuin-A	1.56	0.03*	4.77	1.15-19.74
Rs 4917	0.15	0.82	1.16	0.30-4.47
hsCRP	-0.59	0.55	0.55	0.71-3.89



Graf. 4. Kaplan-Meier analysis - influence of rs4917 polymorphism and inflammation on mortality

## Results:

**RESULTS:** Genotype rs4917 CC was found in 43 (44.3%), CT in 41 (42.3%) and TT in 13 (13.4%) of examined patients. Because of a fact that a complete linkage disequilibrium rs4917 with rs4918 was found, in further analysis only data for rs4917 polymorphism will be reported. Median of serum fetuin-A level was 0.437 g/L. Patients with serum fetuin-A level  $\leq 0.437$  g/L had rs4917 TT genotype significantly more frequent than the ones with serum fetuin-A level  $> 0.437$  g/L (18.6% vs. 8.9%,  $p=0.019$ ). Univariate logistic analysis determined age ( $p=0,000$ ), serum fetuin-A levels ( $p=0,011$ ) and rs 4917 polymorphism ( $p=0.021$ ) while multivariate determined only age ( $p=0,001$ ) and fetuin-A levels ( $p=0,031$ ) as significant predictors of CAC. During the observation period 11 patients died. Kaplan-Meier survival analysis revealed that patients with variant rs4917 T allele and  $CRP \geq 5$ mg/L had the survival rate of only 50 %, but the patients without rs4917 T allele and  $CRP < 5$ mg/L had survival rate of 100% ( $p=0.001$ ).

## Conclusions:

**CONCLUSIONS:** The present study confirms that variant alleles for single nucleotide polymorphisms in genes for fetuin-A: Thr248Met C>T (rs 4917) and Thr256 Ser C>G (rs 4918) were associated with lower serum fetuin-A levels and higher mortality rate in RT and CKD patients.

## References:

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