

CARDIORENAL AND METABOLIC SYNDROME IN RENAL PATIENTS

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The growth of kidney disease has led to increased difficulties for the management of renal patients due to many co-morbidities. Metabolic Syndrome (MetS) and different cardio-vascular events often accompany this group of patients. Cardiorenal syndrome is a very complex disease, in which both kidneys and heart are involved and created a feed-back cycle with worsening the progression and carries a bad prognosis. On the other hand, MetS is an independent risk factor, often associated with cardio-vascular complications and it is often accused, as one of the main factors, of the drastic increase of Cardiorenal syndrome

METHODS: A retrospective study was conducted. 83 pts were enrolled, with low to middle socio-economic status. ATP III was used to define MetS. Statistical analysis included Student's t-test, bivariate and multivariate regression.

RESULTS: 83 patients were included in the study.

The mean age was 48.5 ± 25.5 yrs. 65 were female. No differences between sexes was found.

Cardiorenal Syndrome was founded in 57.8% (43 pts) of pts. Metabolic syndrome was founded in 73.4 % (61 pts) of pts. Both metabolic and cardiorenal syndrome had a high prevalence. We founded a strong relationship between cardiorenal syndrome and MetS with a $p=0.015817$. Anemia had also a high prevalence 72.3 % (60 pts), with a strong association with cardiorenal syndrome $p=0.024261$, but we didn't found any correlation between MetS and anemia.

CONCLUSIONS:

Cardiorenal syndrome and MetS were both presented with a high prevalence in renal patients, even in low to middle socio-economics patients. A close patient monitoring must be done to identify high-risk patients, for primary prevention measures and early interventions. These can be prevented or delayed by a tailored program, a good medical history, patient's behaviours, life style modification and an interdisciplinary collaboration to improve factor identifications and a good controll of Cardiorenal Syndrome and MetS. Regrettably, the availability of effective therapeutic strategies for sustained weigh loss and management of Metabolic Syndrome remains limited. Finally, life-style modification and diet remains, the fundamental factors to improve outcomes in renal patients.