CARDIORENA! 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 ± 25.5yrs. 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, lifestyle modification and an interdisciplinary collaboration to improve factor identifications and a good control of Cardiorenal Syndrome and MetS. Regrettably, the availability of effective therapeutic strategies for sustained weight loss and management of Metabolic Syndrome remains limited. Finally, lifestyle modification and diet remains, the fundamental factors to improve outcomes in renal patients.