

출혈성 신증후군 환자에서 혈청 알부민이 질환의 활성도에 끼치는 영향

가톨릭대학교 의과대학 내과학교실

김영수, 김영옥, 윤선애, 윤정민, 김재욱, 장윤경, 최의진, 장윤식, 방병기

Hypoalbuminemia frequently occurs in hemorrhagic fever with renal syndrome (HFRS) but clinical significance of hypoalbuminemia is not well known. This study was designed to evaluate hypoalbuminemia as a marker of disease severity in patients with HFRS. We evaluated the relationship between the serum albumin level and clinical parameters representing the disease severity in 144 patients with HFRS. The patients were divided into three groups based on the lowest serum albumin level; group I (normal serum albumin), group II (serum albumin <3.5 g/dl and \geq 3.0 g/dl), and group III (serum albumin <3.0 g/dl). Of the 144 patients, 42 patients (29.2%) were group I and 39 patients (27.1%) were group II and 63 patients (43.8%) were group III. Group III had a higher incidence in episode of hypotension, pulmonary edema, and pleural effusion than did group I and group II. The lowest serum albumin level was positively correlated with platelet count ($r=0.505$, $p<0.001$) and was negatively correlated with leukocyte count ($r=-0.329$, $p<0.001$), and BUN ($r=-0.484$, $p<0.001$), and serum creatinine ($r=-0.394$, $p<0.001$), and AST ($r=-0.251$, $p=0.002$). Our data suggest that hypoalbuminemia frequently occurs in the acute stage of HFRS and serum albumin level is associated with the disease severity of HFRS.