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Clinical assessment of gastrointestinal tract disturbance in patients with chronic kidney damage

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Objectives: To evaluate gastrointestinal tract disturbance in patients with chronic kidney damage

Methods: The study included 72 people, of whom 52 made up the main group (CKD group) and 20 people - the comparison group (healthy volunteers without a kidney and cardiovascular disease). The main group consisted of patients with CKD stage 3 (RCGF creatinine 30-59ml / min / m²). The criterion for the inclusion of patients in the study, in addition to reducing the eGFR (estimated glomerular filtration rate), was the presence of arterial hypertension. The renal filtration function was the preserved comparison group and was reduced in the CKD group ($p < 0.001$), which served as a criterion for the inclusion of patients in the study.

Results: The study showed that 75% of patients had complaints of a dry and unpleasant taste in the mouth, poor appetite, aversion to meat food, nausea. These symptoms were directly related to the level of eGFR. There was also a difference in the frequency and nature of the erosive, erosive-ulcerative, ulcerative lesions of the esophagus and formation of erosions and ulcers in patients with CKD occurred significantly more often against the background of chronic gastritis and with the severity of the inflammatory process with severe dyspeptic disorders. The frequency of erosive, erosive-ulcerative and ulcerative lesions of the mucous membrane of the upper GI tract among CKD patients was 72%, which were manifested by nausea, decreased appetite

Conclusions: The frequency, nature, prevalence of these lesions are associated with the treatment of CKD - active (hemodialysis) and conservative, the stage of chronic renal failure. In patients with chronic renal failure, the endoscopic picture of erosive, erosive-ulcerative, ulcerative lesions of the upper GI tract is diverse