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DYNAMICS OF CONCENTRATION OF RENIN AND ALDOSTERONE IN SYMPTOMATIC RENAL HYPERTENSION IN ELDERLY PATIENTS

Kamola Minovarkhujaeva[1], Ravshankhuja Minavarkhujaev[1], Zilola Asilova[1], Kamron Berdiev[2]
[1]Department of Internal Medicine-Therapy, Tashkent Medical Academy, Uzbekistan
[2]Department of Internal Diseases, Tashkent Medical Academy, Uzbekistan

Objectives: Renovascular hypertension is an increasing blood pressure is caused by the kidneys' hormonal response, because of narrowing the arteries which are supplying the kidneys.

Methods: We examined 40 patients with symptomatic renal hypertension of 60-74 years were examined, enzyme-linked immunosorbent assay used to determine the concentration of aldosterone and renin in blood plasma.

Results: In the initial stage, a slight increase in the activity of aldosterone 76 ± 13 pg / ml / h and a significant increase in the concentration of renin activity in blood plasma of 8.9 pg / ml / h were revealed in patients. As the disease progresses in patients of this group, it was accompanied by a decrease in renin activity and a significant increase in aldosterone concentrations of 6.5 pg / ml / h and 113 ± 22 pg / ml / h, respectively, which exceeded that in healthy individuals. There were significant differences in plasma renin activity depending on the sex of the disease. So in male patients in the initial stages of the disease, more pronounced plasma renin activation was noted than in women. In women, an increase in the concentration of aldosterone was noted, more pronounced than in men. As the disease progresses, plasma renin activity decreases more significantly in men and the increase in aldosterone is more significant in women.

Conclusions: Thus, the analysis of the initial level of renin activity and aldosterone concentration depending on the stage of the disease revealed that with the progression of the disease the number of patients with low renin activity indicators increases, i.e. with a "hyporenin" form. Also, along with this, the number of patients with high plasma aldosterone levels increased. The secretory activity of renin is dependent on the state of the sympathoadrenal system.