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Cardiovascular parameters and biomarkers for predicting mortality in dialysis dependent CKD patients.

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Objectives: Primary objective : To study echocardiography and electrocardiography parameters and their correlation with mortality in dialysis dependent CKD patients
Secondary objective: To study cardiac biomarkers and their correlation with mortality.

Methods: Prospective observational study
sample size : 92
Patients ECG and 2D echo was done and blood samples were taken for cardiac biomarkers.
Data was analysed by SPSS VERSION 23

Results: Total percentage of male is 63%,mean age of patients was 36.4±14.022 years,mean dialysis vintage 7.95±6.606 months. Mean NT-Pro BNP in survivors were 13258±6847.84pg/ml and in non survivors were 20146.20±15753.60 pg/ml (P= 0.006). Mean LVMI was 167.19±61.847 and mean RWT was 0.51±0.105,mean QTc interval was 452.84± 61.847 mv,mean frontal plane QRS-T angle was 49.06±44.055 degree, mean Sokolov Lyon criteria was 3.43±1.249 mv.
LVMI > 107.2 g/m^2 will predict mortality with sensitivity of 88.2% ,specificity of 22.0%.
CK-MB > 4.8 IU/L predicts mortality with p value = 0.03 (within month),sensitivity and specificity of 29.4 and 61.0% respectively.NT-Pro BNP with score > 9642.9pg/ml has sensitivity of 68.6% and specificity of 36.6%.

Conclusions: In this study we found that there is evidence of NT-Pro BNP and LVMI and frontal plane QRS-T angle acting as independent markers for prediction of mortality in CKD patients on hemodialysis. LVMI score of > 107.2 g/m^2 will predict mortality with sensityvity of 88.2% and specificity of 22.0%. CK-MB > 4.8 iu/l has immediate mortality with specificity of 61%.