



Shaping Tomorrow's Nephrology: Insight-Driven Kidney Care

KSN SEOUL, KOREA
2026

The 46th Annual Meeting of the Korean Society of Nephrology



Jun 11 (Thu) – 14 (Sun), 2026

COEX, Seoul, Korea

Abstract Type : Oral presentation

Abstract Submission No.: A-0821

Abstract Topic : Pediatric Nephrology + Inherited Kidney Disease

Thyroid and parathyroid function in pediatric CKD

Dina Sallam

Department of Pediatrics-Nephrology, Faculty of Medicine, Ain Shams University, Cairo, Egypt , Egypt

Case Study : Background: Thyroid and parathyroid dysfunction are common in pediatric patients with chronic kidney disease (CKD) and may affect growth, metabolism, and overall health. This study evaluated the prevalence and characteristics of these abnormalities in children with CKD on conservative treatment or hemodialysis (HD). Methods: This cross-sectional study included 104 children aged 1–18 years with CKD stage 2–5. Patients were divided into two groups: conservative management (CKD stages 2–5) and stage 5 on regular HD (CKD5d). Clinical, laboratory, and radiological assessments of thyroid and parathyroid function were performed. HD modality, duration, and efficacy were recorded. Results: Most patients had growth impairment. Thyroid abnormalities were detected in 62.5% of patients, primarily via laboratory tests, while parathyroid abnormalities were observed in 96.2%. HD patients had lower prevalence of thyroid abnormalities, and most were diagnosed with euthyroid sick syndrome. Free T3 levels were higher in patients on pure OL-HDF compared to hybrid HD, while Free T4, TSH, PTH, and thyroid size were similar across groups. Vitamin D3 deficiency and lower serum calcium were significantly associated with thyroid and parathyroid dysfunction. Longer CKD duration and oral calcium/iron supplementation were linked to higher prevalence of thyroid abnormalities, while parathyroid dysfunction correlated with higher ferritin and blood urea levels. Conclusion: Thyroid and parathyroid abnormalities are highly prevalent in pediatric CKD, often asymptomatic and detectable only via laboratory testing. Regular screening and management are essential, with HD modality potentially influencing thyroid function. Longitudinal studies are needed to assess long-term outcomes.