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THE IMPACT OF CARDIOVASCULAR COMORBIDITY ON SURVIVAL IN DIALYSIS PATIENTS

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Objectives: To study the effect of comorbidity of the CVD on survival in patients with ESRD among the population of Uzbekistan.

Methods: We conducted a prospective cohort study of 165 patients (90 men, 75 women) in 3 different dialysis centers in the country for 30 months (from January 2018 to July 2020). The average age was 48.1 ± 14.1 years. 56% (n=92) of patients (52 men and 40 women) had CVD and 44% (n=73) of patients (38 men and 35 women) had no CVD. The main CVDs were hypertension, coronary heart disease, heart failure and various arrhythmias. The survival rate was determined using the Kaplan-Meier method. The 95% confidence interval was determined using the Greenwood method.

Results: After 30 months of follow-up, 43.6% (n=72) of all patients died, 56.4% (n=93) patients survived (of which 11 underwent Tx). The average age of the deceased (53.6 ± 1.6) was significantly higher than that of patients continuing to receive HD (45.6 ± 1.5). The average duration of hemodialysis in survivors (33.0 ± 5.4) was higher than in the dead (28.6 ± 3.9). The study of the further fate of patients, showed that among the deceased patients, 68.1% (n=49) of patients were patients who had CVD, while among those who survived, 53.7% (n=44) had no CVD. Among those continuing to receive dialysis, there were 31.7% more patients without CVD than among patients with diagnosed CVD. In dialysis patients with CVD who died within the period of 30 months of prospective observation was 39.6% higher than in patients without CVD (Figure 1). The survival rate of patients with CVD was 0.44 [95% CI 0.34-0.55], while in patients without CVD it was 0.67 [95% CI 0.55-0.78].

Conclusions: Cardiovascular comorbidity negative affects the survival rate of dialysis patients in Uzbekistan. Dialysis patients without CVD in our country have a 33% higher survival rate than patients with CVD.

Figure 1. Survival of patients with CKD 5D, depending on the presence of CVD.

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FULLY VIRTUAL MEETING
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