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**THE INFLUENCE OF CARDIOVASCULAR COMORBIDITY ON THE SURVIVAL
RATES OF DIALYSIS PATIENTS IN UZBEKISTAN**

Olimkhon Sharapov, Botir Daminov

Department of Adult nephrology, Republican Specialized Scientific Practical Medical Center of
Nephrology and Kidney transplantation, Uzbekistan

Objectives: Comparative study of survival rates in dialysis patients, depending on the presence of cardiovascular diseases.

Methods: We conducted a prospective cohort study of 165 patients (90 men, 75 women) in 3 different dialysis centers in Uzbekistan. The study lasted for 30 months. The mean age was 48.1 ± 14.1 years. Among the examined dialysis patients, 56% of patients (52 men and 40 women) had CVD and 44% of patients (38 men and 35 women) did not have CVD. The main CVDs were arterial hypertension, coronary heart disease, heart failure and various arrhythmias. Survival was determined by the Kaplan-Meier method.

Results: After 30 months of follow-up, 43.6% of all patients died, 56.4% survived. In dialysis patients with CVD, sudden cardiac death accounted for 63% ($n=30$) of all causes of death, while in patients without CVD it was 59% ($n=14$). The average duration of hemodialysis in survivors (33.0 ± 5.4) was higher than in the deceased (28.6 ± 3.9). The study of the further fate of patients showed that among the deceased patients, 68.1% ($n=49$) of patients had cardiovascular diseases, and among the survivors, 53.7% ($n=44$) did not have cardiovascular diseases. 31.7% more patients without CVD continued to receive dialysis than those with diagnosed CVD. Dialysis patients with CVD who died within 30 months of prospective follow-up had 39.6% more deaths than those without CVD. Survival in patients with CVD was 0.44, and in patients without CVD it was 0.67.

Conclusions: Cardiovascular comorbidity adversely affects the survival of dialysis patients in Uzbekistan. In dialysis patients without cardiovascular disease in our country, the survival rate is 33% higher than in patients with CVD. These data in practical terms force us to reconsider the strategy of managing these patients in favor of a strict system of prevention and treatment of CVD, which has significant prospects for increasing survival and referral to kidney transplantation.

Figure 1. Survival of dialysis patients with and without cardiovascular diseases.

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