АБСТРАКТЫ

АКТУАЛЬНЫЕ ВОПРОСЫ ТРАНСПЛАНТОЛОГИИ В НЕФРОЛОГИИ

Arterial Stiffness and Metabolic Syndrome Indices in Renal Transplantation Patients

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PURPOSE AND RELEVANCE: Although renal transplantation improves survival, cardiovascular morbidity and mortality still remain as a significant problem compared with nonrenal populations. In end stage renal disease metabolic cardiovascular risk factors such as hypertension, hyperuricemia, obesity and diabetes mellitus have been confirmed to be positively correlated with arterial stiffness. Arterial stiffness is an important characteristic of the arterial wall and can be assessed noninvasively by the measurement of carotid-femoral pulse wave velocity (PWv). The aim of this study is to evaluate the risk factors for arterial stiffness in kidney transplant recipients.

PARTICIPANTS: One hundred and forty nine kidney transplant recipients from our renal transplant outpatient clinic were enrolled into the study.

METHODS AND ANALYSIS: All patients were evaluated for their standard clinical (age, gender, duration of hemodialysis, post-transplant time), biochemical parameters. Anthropometric and body composition analyses were performed for all patients. Body compositions were analyzed by using the Body Composition Analyzer (Tanita BC- 420MA). PWv was determined from pressure tracing over carotid and femoral arteries using the SphygmoCor system.

RESULTS: Patients were divided into two groups according to PWv levels. The frequency of patients with PWv \geq 7 m/s was higher in patients with new onset diabetes (55.9%), hyperuricemia (uric acid level > 7 mg/dl) (p:0.029, 0.05). Highercarotid-femoral PWv was significantly related with systolic (p:0.003) and diastolic blood pressure (p:0.002),

uric acid (p:0.0001) and fasting glucose (p: 0.02) levels. According to body composition analyses, muscle mass, visceral fat ratio and body weight were significantly higher in patients with PWv \geq 7 m/s (p<0.005). In patients with high PWv, sagittal abdominal diameters and waist circumferences were significantly higher than patients with PWv < 7 m/s. When criteria for metabolic syndrome were assessed there were a significant increase in pulse wave velocity in patients with 0-1; 2-3; and 4-5criteria (p<0.01).

CONCLUSIONS: In post transplantation period, metabolic syndrome indices as high blood pressure, hyperuricemia, hyperglycemia and increased waist and hip circumferences are closely related with arterial stiffness. For cardiovascular risk reduction after renal transplantation; blood pressure, serum glucose and uric acid levels should be under strict control.

KEYWORDS: Arterial Stiffness, Metabolic Syndrome, Renal Transplantation Patients.

Значение внедрения информационной системы «Регистр доноров, реципиентов и пациентов, рекомендованных к трансплантации органов» для развития трансплантологии в Казахстане

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ЦЕЛЬ. В целях развития концепции посмертного донорства и соблюдения принципов справедливого распределения органов среди пациентов, в настоящее время формируется медицинская информационная система под рабочим названием «Регистр доноров, реципиентов и лиц, рекомендованных к трансплантации» (далее-Регистр).

ОПИСАНИЕ СУЩЕСТВУЮЩИХ МЕТОДИК. Практика стран с высокой трансплантологической активностью указывает на существование отдельных реестров для «листов ожидания», регистрации прижизненных и посмертных доноров, а также учета резуль-