

Screening and Risk Factors for Vascular Calcifications in Hemodialysed Patients

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Introduction :

Vascular calcifications (Cvs) are a significant risk factor for mortality during chronic kidney disease. It is therefore important to know the risk factors associated with their development. The purpose of this work was to determine the prevalence of Cvs in hemodialysis and to identify their risk factors.

Methods:

This is a cross-sectional CAA(calcification of the abdominal aorta); screening study in 40 chronic hemodialysed patients for more than six months who received an unprepared abdominal x-ray (AUP) profile, conducted in the nephrology and haemodialysis department of the CHU IBN ROCHD over a period of 3 months from November 2019 to January 2020.

Results:

There were 39 hemodialysed patients: 22 men and 17 women. The average age of our population was 43.7 years with extremes ranging from 16 to 72 years. The mean duration of hemodialysis was 12.5 years, the initial nephropathy was dominated by undetermined nephropathy. Caa were found in 37.5% of cases. Compared to the group without CAA, the majority of patients with CAA were male, older, and older in hemodialysis. No significant difference between the two groups in phosphocalcic balance, hemoglobin or CRP.

Discussion :

The results of our study demonstrate the high prevalence of hemodialysis CAA. Age and length of service in hemodialysis are independent risk factors. Although phosphocalcic parameters are not involved in our series, it is accepted that the use of low doses of calcium carbonate, vitamin D and the diet poor in dairy products, as well as the use of non-calicular phosphorus chelators could reduce the prevalence of these calcifications.

Conclusion :

The Unprepared Abdominal (AUP) is a simple and reproducible means of screening and tracking this complication in hemodialysis.