Estimated glomerular filtration rate, urine albumin excretion, and survival among patients consulting in public Chilean public primary care clinics

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RENAL FAILURE Volumen: 38

Número: 3

Páginas: 397-403

DOI: 10.3109/0886022X.2015.1136892 **Fecha de publicación:** MAY 15 2016

Ver información de revista

Resumen

Chronic renal disease (CRD) in its pre-dialysis stage is an important risk factor for mortality among adults. The aim of this study was to assess the effects of CRD on mortality among consultants in Chilean public primary care clinics. We obtained information about serum creatinine, urinary albumin excretion (UAE), blood pressure, and body mass index of 5224 consultants [3379 females aged 67 (59-75) years and 1845 males aged 68 (59-75) years] in three clinics of Metropolitan Santiago. Kaplan-Meier curves and Cox proportional hazard regression models were used to determine risk factors for mortality, determined 41 months after obtaining the blood samples. During the follow-up period, 262 patients died (33% due to circulatory causes and 29% due to tumors). Kaplan-Meier curves showed that there was a significant association between survival, estimated glomerular filtration rate, and UAE. Cox models showed that serum creatinine, UAE, a lower body mass index, and a history of diabetes were significant mortality predictors. A sensitivity analysis performed eliminating extreme ages (less than 50 and more than 80 years), included high diastolic pressure as a predictor of survival. We conclude that among patients with CRD in its pre-dialysis stage, UAE is an important predictor of survival, along with serum creatinine. A low body mass index was associated with a higher mortality.

Palabras clave

Palabras clave de autor: Chronic renal disease; mortality; urinary albumin excretion

KeyWords Plus: CHRONIC KIDNEY-DISEASE; BODY-MASS INDEX; ENDOTHELIAL SURFACELAYER; SYSTOLIC BLOOD-PRESSURE; COLLABORATIVE METAANALYSIS; ORTHOSTATIC

HYPOTENSION; DIABETIC-PATIENTS; ALL-CAUSE; MORTALITY; ASSOCIATION

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Editorial

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Categorías / Clasificación

Áreas de investigación: Urology & Nephrology

Categorías de Web of Science: Urology & Nephrology

Información del documento

Tipo de documento: Article

Idioma:English

Número de acceso: WOS:000371797700011

ID de PubMed: 26765359

ISSN: 0886-022X eISSN: 1525-6049

Información de la revista

• Impact Factor: Journal Citation Reports®

Otra información

Número IDS: DG1AP

Referencias citadas en la Colección principal de Web of Science: 34

Veces citado en la Colección principal de Web of Science: 0