

## Letter

## Older Obese Chronic Kidney Disease Diabetic's Patients

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## Keywords

Chronic kidney disease; Cardiovascular disease; Diabetes

## Letter to Editor

Cardiovascular disease (CVD), the leading cause of death, is mostly precipitated by cardiometabolic risk and chronic kidney disease (CKD). Purpose of the study: Prospective observational study of factors present at initial evaluation of stage 3 CKD patients proceeding from external consultations after two years of follow-up. Exclusion criteria: Under 40 or mayor 79 years old, anemia, previous heart or hepatic failure, valvular or ischemic cardiopathy, arrhythmias, clinical arterial peripheral disease or immunosuppressive treatment. Inclusion criteria: All the incidental patients who wish to participate between January, 2012 and January, 2014. The study was approved by the Committee of Ethics of Clinical Investigation.

There were studied 126 stage 3 CKD patients (77 stage 3A, 49 stage 3B) (72 men, 54 women) (33 diabetics). 20 patients had CVD

event and at the initial evaluation, they showed: older age (67.70+6.08 vs. 59.97+9.73 years old,  $p=0.01$ ), higher BMI (33.63+5.91 vs. 28.94+4.48 Kg/m<sup>2</sup>,  $p=0.0001$ ), higher glicated haemoglobin (6.61+1.0 vs. 5.98+0.82%,  $p=0.001$ ) and higher levels of NT-proBNP (261.61+304.75 vs. 130.30+159.48 pg/ml,  $p=0.005$ ). Also, they were treated more frequently with diuretics (75% vs. 42.5%,  $p=0.008$ ), an ACE-inhibitor (55% vs. 19.8%,  $p=0.001$ ) and insulin (90.9% vs. 13.6%,  $p=0.0001$ ); however they were lesser taken a calcium-antagonist (27.5% vs. 72.5%,  $p=0.015$ ). The analysis of logistic regression of the variables that were statistically significant was significative for BMI ( $p=0.014$ ) only. There were no differences related to sex, smoking, troponine, glomerular filtration rate, proteinuria or other pharmacological treatments. 20 cases of CVD events were: 4 ischemic cardiopathies, 2 cerebrovascular accidents, 9 auricular fibrillations, 4 arterial peripheral diseases (one amputation and one bypass) and 1 heart failure.

## Conclusion

In spite of the low number of patients, it seems that stage 3 CKD patients without anemia or previous clinical cardiovascular event who had a CVD event after two years of follow up, were more often older obese diabetics patients treated with insulin, an ACE-inhibitor or a diuretic at initial evaluation. According to data analyzed, and as usual, obesity is related to CVD events in CKD patients and in the future, it would be interested to study the adequate treatment for older obese diabetic patients.