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Predictors of intradialytic hypertension in chronic end stage renal dialysis patients in a tertiary hospital in Davao city

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Intradialytic Hypertension (IDH) is among the most common complications of hemodialysis, which leads to cardiac morbidities, complications and even death. This single center hospital based prospective observational cohort study investigated on (1) the prevalence of IDH and (2) determining the demographic, clinical profile and modifiable factors which can predict the occurrence of IDH. Three hundred and seven (307) patients enrolled at the center were included. Incidence of IDH in the study was at 37% which was higher as compared to the worldwide rate of 5-15%. Males were significantly greater than women in the prevalence of IDH. Presence of hypertension as a comorbid is significantly higher in the IDH than in the non IDH group. Among the modifiable factors, serum albumin levels, ultra-filtrate volumes, mean heart rate and arterial pressures showed significant difference among groups. Results from the bio-impedance monitor likewise showed that the volumes of total fluid, extracellular water and intracellular water, levels of urea content and masses of adipose tissue and lean tissue were significantly higher in those with IDH. Multivariate analysis revealed that the highest odds ratio in predicting the onset of IDH were ultra-filtrate volumes, serum albumin levels and intradialytic hypotension. The high incidence of IDH should serve as an alarm to the institution. Measures should be taken to reduce its incidence by modifying certain practice that are already used to reduce its presence in hemodialysis patients and preventing more morbid complications like death.

Biography

Kirbe A Labarcon has completed his Doctor of Medicine degree at the Davao Medical School Foundation. He has then pursued his Post-graduate Internship and Residency in Internal Medicine at the Southern Philippines Medical Center.

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