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Chronic kidney disease and psoriasis in gestation

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Background: Chronic kidney disease (CKD) and psoriasis are an emergent health care dilemma lately recognized in their complete aspect. According to Kidney Disease Outcomes Quality Initiative (KDOQI) guidelines on diagnosis and staging of CKD they focus on earlier stages of kidney disease when constant signs of renal damage are present but renal function may still be in normal ranges. It has been estimated that 3% of women of childbearing age are affected by CKD. Psoriasis is a chronic relapsing skin disease that affects 50% of women and majority have onset of disease before 40 years corresponding with the reproductive years.

Aim: To compare the outcome of CKD with early kidney disease (normal renal function) in gestation and to determine the frequency of low birth weight having psoriasis in gestation.

Methods: This case control study was conducted from March 2015 till May 2015 and non probability sampling technique was used on 41 patients. Forty singleton deliveries were studied; Controls were low risk pregnancies without psoriasis and were randomly selected for comparison. Chronic kidney disease and psoriasis outcome was poor as compared to normal pregnancies. Univariate and Multivariate analysis, adjusting for important demographic factors and comorbidities was conducted to assess the relationship of psoriasis and chronic kidney disease including preterm labor, low birth weight (<2500 gm), spontaneous abortion, recurrent abortion, gestational diabetes mellitus, non reassuring monitoring, obstructed labor and preeclampsia in reduced and full models of ANOVA in regression analysis. (Reduced model $Y = \beta_0 + \beta_1 X_1 + \epsilon$ and the full model $Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \beta_5 X_5 + \beta_6 X_6 + \beta_7 X_7 + \beta_8 X_8 + \epsilon$).

Results: The subsequent complications were significantly ($p < 0.05$) associated with pregnancies to chronic kidney disease and psoriatic patients. The multivariate analysis showed that preterm labor was at (OR 1.12, 95% CI 1.02-1.23), low birth weight was (OR 1.33, 95% CI 1.29-1.45), spontaneous abortion was (OR 1.45, 95% CI 1.38-1.59), recurrent abortion was (OR 1.78, 95% CI 1.57-1.89), gestational diabetes mellitus was (OR 2.17, 95% CI 1.65-2.23), non reassuring monitoring was (OR 1.82, 95% CI 1.68-1.97), obstructed labor was increased risk (OR 1.71, 95% CI 1.45-2.34) and preeclampsia (OR 1.62, 95% CI 1.28-2.84).

Conclusion: Psoriasis and Chronic Kidney Disease were significantly associated with gestation and were independent risk factors.

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