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Variations in albumin as a predictor of non dialysis related adverse events in chronic hemodialysis patients

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Malnutrition and inflammation are important features in patients who have ESRD and are on Hemodialysis (HD). The nutritional status is assessed by biochemical parameters of which serum albumin being most common index of inflammation as assessed by CRP concentrations. Both are independent predictor of hospitalization in Chronic hemodialysis CHD patients.

The insight into changes in albumin predicts all-cause, cardiovascular, and infection-related mortality in CHD Although assessment of pre-dialysis serum potassium, phosphorous, BUN and albumin levels is important but we are assuming that changes in albumin level predicts the hospitalization and nutrition status more accurately in hemodialysis patients. We selected a total of 89 patients who underwent chronic dialysis for a period of 6 months and evaluated them retrospectively. Then patients were divided into three groups. Group 1, with no hospitalizations. Grpup 2, with one hospitalizations with adverse events, Group 3 with two or more hospitalizations with adverse events. The results were expressed as mean values with +/ - SD. There was a significant difference in the mean albumin value in Group 3 aas compared to the other groups. There was no difference in the mean SAD values of the groups Potassium, phosphorus or BUN. In conclusion, variations in albumin with low values correlate with hospitalizations and can be used as an early marker of adverse events such as impending infection or access dysfunction.

Biography

Dr. Farhan Ali is an Assistant Professor of Medicine at Universoty of Maryland, Baltimore. He completed his traning in Internal Medicine from Nassau University Medical Center in NY, and then completed his Nephrology fellowship at Beth Israel Medical Center NY, and a Critical Care fellowship at Montefiroe Medical Center, NY. He is a Critical Care Nephrologist at University of Maryland Medical Center and his key research inteests include dialysis applications, hemodynamic alterations duering dialysis, and CRRT.

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