P11.19: DIFFERENT BEHAVIOUR OF ARTERIAL STIFFNESS ACCORDING SEX AND AGE IN A POPULATION OF PATIENTS IN PRIMARY PREVENTION

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on chest x-ray was correlated with the above mentioned established markers of vascular calcification.

**Methods:** AoAC, AoAC and PWV were measured in 88 patients on RRT who were Danish participants in a European multicenter cross-sectional study. Inclusion criteria were: >18 years of age and ~3 months of maintenance haemo- or peritoneal dialysis treatment. AoAC was measured using a semi-quantitative method. The cross section of the aortic arch was divided into 16 sectors on a plain frontal chest x-ray. Sectors showing signs of calcified plaques in the form of typically shaped densities were identified. The carotid-femoral PWV was measured using applanation tonometry.

**Results:** 72% had a AoAC score > 0 compared to 81% with a AAC score > 0. AoAC was significantly positively correlated with AAC (r = 0.69, p < 0.001) and PWV (r = 0.35, p < 0.001). The positive- and negative predictive values of AoAC with respect to AAC were 98% and 32%, respectively.

**Conclusion:** The presence of calcification on chest x-ray was positively correlated with the above mentioned established markers of vascular calcification and may be used in risk stratification of dialysis patients. Further evaluation is required.

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**P11.18**

**DETERMINANTS OF SUBCLINICAL ORGAN DAMAGE IN PAEDIATRIC KIDNEY TRANSPLANT RECIPIENTS**

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**Abstract:** The presence of subclinical organ damage in children after transplantation is known. However, the determinants of this damage are not well established. The aim of our study was to investigate the relationship between different markers of subclinical organ damage in children after renal transplantation.

**Methods:** 45 kidney transplant children (29 males, 16 females) aged 2-18 years were included in the study. The following parameters were measured: lipid profile, calcium-phosphate metabolism, renal function, proteinuria, and arterial stiffness (PWV and AoAC). The relationship between these parameters and the presence of subclinical organ damage was analyzed.

**Results:** The prevalence of subclinical organ damage was 68% in males and 56% in females. The strongest association was found between PWV and AoAC with respect to proteinuria (r = 0.50, p < 0.01) and arterial stiffness (PWV and AoAC) with respect to proteinuria (r = 0.50, p < 0.01). The positive predictive values of PWV and AoAC with respect to proteinuria were 81% and 78%, respectively.

**Conclusion:** The presence of subclinical organ damage in children after renal transplantation is high. PWV and AoAC are strong predictors of proteinuria and arterial stiffness. Further studies are needed to identify the mechanisms underlying the association between subclinical organ damage and arterial stiffness.