RELATION BETWEEN BCM AND ECOCARDIOGRAPHIC PARAMETERS TO REFLECT VOLUME STATUS IN PERITONEAL DIALYSIS Patients

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Objectives: Fluid imbalance is a frequent condition in peritoneal dialysis (PD) patients. Fluid overloading is one of causes to lead to cardiovascular instability. Even though there are no accurate methods to determine volume status in PD, body composition monitor (BCM) is used as an objective measurement. The aim of this study was to find echocardiographic parameters associated with volume status compared to BCM parameters in PD patients.

Methods: This study was conducted on 74 PD patients in Busan Paik Hospital during 2014 - 2015. We used BCM to assess volume status, echocardiography to evaluate heart function and structure, and collected epidemiologic data. To account for the relation between BCM and echocardiographic parameters, we conducted regression analysis.

Results: Patients were 46±12 years old, 55% female, and 39% diabetic. A total of 6(8%) all-deaths were reported. 10 (13%) among 74 patients received kidney transplantation, 10 patients transferred from PD to hemodialysis. Median dialysis vintage was 25.3 months (IQR 1.6, 127.2months). Relative overhydration had positive correlation with systolic blood pressure ($r²=0.12$, $p=0.003$), diastolic blood pressure ($r²=0.07$, $p=0.03$), and extracellular water (ECW)($r²=0.27$, $p<0.001$). Conversely relative OH had negative correlation with intracellular water ($r²=0.08$, $p=0.02$)and lean tissue index($r²=0.17$, $p=0.003$). ECW had positive correlation with left ventricular end diastolic dimension (LVEDD) ($r²=0.27$, $p<0.001$)(Figure 1) and left ventricular diastolic posterior wall thickness (LVDPWT)($r²=0.14$, $p=0.003$).

Conclusions:

Fluid overload in PD patients was associated with rise in ECW, which increased according as LVEDD enlargement. Echocardiographic parameters of Left ventricle were good markers of volume status in PD patients. Further studies to understand the change in volume status over time are needed.