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Parathyroid hormone level in DM patients on programmed hemodialysis

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Objective: Diabetes Mellitus patients with kidney insufficiency on hemodialysis often develops hyperparathyroidism due to calcium phosphorus abnormalities, where the early marker is a blood parathyroid hormone (PTH) level. We investigate the frequency of determination and compare its level in the blood plasma in people with DM on programmed hemodialysis.

Material and methods: Data of 56 patients on programmed hemodialysis who were admitted to the Republican Centre of Nephrology and Kidney Transplantation such as glycemia, total blood hemoglobin, blood urea nitrogen, bilirubin, albumin, blood plasma calcium, phosphorus were analyzed and compared according to PTH level high (hPTH) and normal (nPTH) range.

Results: In 37% of patients on programmed

hemodialysis high PTH level were detected. Patient average age, body weight, blood ALT, AST level were not differ between the groups. In hPTH group patients has significantly higher level of blood calcium, whereas blood hemoglobin glycemia, albumin, phosphorus level were lower than in nPTH patients. When we divided hPTH level group to mild (M, PTH from 100 to 200pg/mL) and severe (S, PTH higher than 300pg/mL) it was seen only significant decreasing calcium, phosphorus and PTH level. Two patients (3.5%) were undergo to surgery due to parathyroid adenomas.

Conclusion: High PTH level is a frequent future among patients on programmed hemodialysis and parathyroid adenomas were determined in 3.5% among them. PTH level should be tightly monitored in patients with DM on programmed hemodialysis.

Biography

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