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The incidence for contrast-induced nephropathy in patients with chronic kidney disease and with normal renal function after percutaneous coronary intervention

[1]Toride Kyodo General Hospital

Osamu Kuboyama[1], Takeshi Tokunaga[1], Toshiyuki Iwai[1], Yumiko Oosaka[1], Kazuo Kobayashi[1]

Background: Contrast-induced nephropathy (CIN) remains a common complication of radiographic procedures. CIN can negatively affect long-term patient morbidity and mortality. We investigated the rates of CIN of patients with normal renal function (eGFR >60ml/min/1.73m^2) and patients with chronic kidney disease (CKD)Methods: We studied consecutive 581 patients (67.9 ± 7.8 years, 450 male), who underwent percutaneous coronary intervention (PCI) in our hospital. We defined CIN as an increase of >25% or >0.5mg/dl of S-Cr within 48h of PCI. The rates of CIN were calculated respectively. Results: The prevalence of CIN was 12.0% (43/359) in patients with normal renal function and 7.7% (17/222) in patients with CKD (P=0.09). The risk factors for CIN were proteinuria, amount of contrast media and primary disease in patients with normal renal function and no risk factor in patients with CKD.. Amount of infusion after PCI and eGFR before PCI were not significant for CIN. Conclusion: The incidence of CIN was tend to be higher in patients with normal renal function than in patients with CKD. The risk factor for CIN was only amount of contrast media. Therefore, we must reduced amount of contrast media to prevent CIN. even in patients with normal renal function.