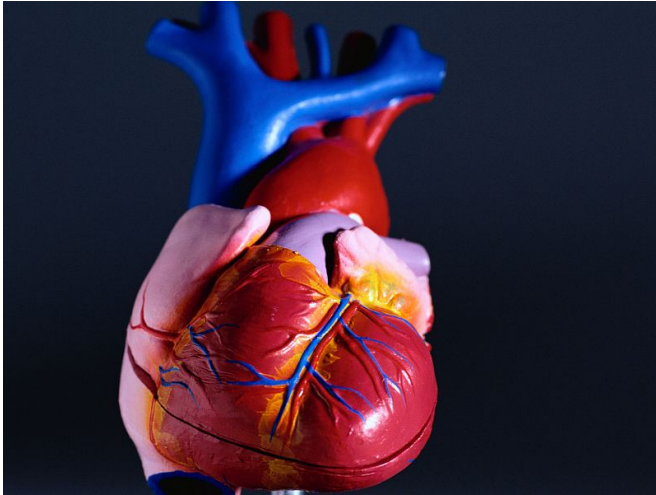


Mortality up with impaired LV global longitudinal strain in CKD

13 July 2017



renal transplantation, LV GLS \leq 10.6 percent was significantly associated with increased risk of all-cause mortality (hazard ratio, 2.18).

"In conclusion, in predialysis and [dialysis patients](#), severely impaired LV GLS is independently associated with an increased risk of mortality," the authors write.

One author disclosed financial ties to Abbott Vascular.

More information: [Abstract](#)
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(HealthDay)—Severely impaired left ventricular (LV) global longitudinal strain (GLS) is associated with worse prognosis in predialysis and dialysis patients, according to a study published in the Aug. 1 issue of *The American Journal of Cardiology*.

Liselotte C.R. Hensen, M.D., from Leiden University Medical Center in the Netherlands, and colleagues measured LV GLS in a retrospective cohort of predialysis and dialysis [patients](#) (chronic kidney disease stage 3b to 5) who underwent clinically indicated echocardiography. They divided patients according to quartiles of LV GLS.

Sixty-five and 35 percent of the 304 patients were in predialysis and [dialysis](#), respectively. The researchers found that 34 percent of patients underwent renal transplantation during a median follow-up of 29 months, and 36 percent died. Compared with other groups, patients with the worst function (LV GLS \leq 10.6 percent) showed significantly worse prognosis. After adjustment for age, gender, albumin levels, atrial fibrillation, and

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