

# Surgery for congenital heart disease tied to kidney disease

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cumulative incidence of death and ESKD at one, five, and 10 years was higher in children with [surgical repair](#) of congenital heart disease (death: 3, 4, and 5 percent, respectively; ESKD: 1, 2, and 2 percent, respectively). The [increased risk](#) for ESKD and death was based on the severity of congenital heart disease, with the highest risk seen in children with hypoplastic left heart syndrome.

"The risk of ESKD and mortality was highest in the first year after surgery, which highlights the importance of closer outpatient follow-up after surgery and new risk stratification approaches to identify those children at highest risk," the authors write.

Parikh disclosed financial ties to the biopharmaceutical industry.

**More information:** [Abstract/Full Text \(subscription or payment may be required\)](#)

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(HealthDay)—The risk for mortality and end-stage kidney disease (ESKD) is high in children who undergo surgical repair for congenital heart disease compared with the general population, according to a study published in the October issue of the *Clinical Journal of the American Society of Nephrology*.

Chirag R. Parikh, M.B.B.S., Ph.D., from Johns Hopkins University in Baltimore, and colleagues followed 3,600 [children](#) who had their first surgery for [congenital heart disease](#) within 10 years of birth. Each surgical case was matched to 10 children from the [general population](#) who were similar in age, sex, index date, rurality, and neighborhood income. All-cause mortality and ESKD rates were compared after a median of 5.9 years of follow-up.

The researchers found that during follow-up, 4 percent of children who had surgery for congenital heart disease died and 1 percent had ESKD. Compared with the matched control population, the

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