

中文題目：台灣體染色體顯性多囊性腎臟病病人與一般族群的心血管事件之比較

英文題目：The cardiovascular events in autosomal dominant polycystic kidney disease patients in Taiwan

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摘要：

Background:

Cardiovascular problems are a major cause of morbidity and mortality in patients with autosomal-dominant polycystic kidney disease (ADPKD). However, the association between the ADPKD and cardiovascular disease is not fully understood. The aims of this study were to evaluate the risks for cardiovascular events (acute coronary syndrome, ischemic stroke, and hemorrhagic stroke) among ADPKD patients in comparison to a reference group in a large-scale epidemiological study.

Materials and Methods:

Using Taiwan's National Health Insurance Research Database, we conducted a retrospective cohort study. We identified patients diagnosed with ADPKD between 1997 and 2008 in the Catastrophic Illness Patient Database. Each patient with ADPKD was matched to 3 control non-ADPKD patients based on age, sex, and index year, and all patients were followed up from the index date to December 31, 2009. We used Cox regression model with adjustment for live area, socioeconomic status, and comorbid disorders (include diabetes mellitus, hypertension, dyslipidemia, chronic renal failure, congestive heart failure, atrial fibrillation, peripheral vascular disease, cerebrovascular disease, chronic obstructive pulmonary disease, and malignancy) to assess the independent factors in determining the risk of developing cardiovascular events.

Result:

The study group consisted of 1564 ADPKD patients, along with 4580 non-ADPKD controls. During the follow-up period, the multivariable Cox regression analysis demonstrated that the ADPKD patients as compared with their controls showed a significantly increased risk of acute coronary syndrome (adjust hazard ratio [aHR], 1.760; 95% confidence interval [CI], 1.448 to 2.141; $p < 0.001$), ischemic stroke (aHR, 2.097; 95% CI, 1.644 to 2.675; $p < 0.001$), and hemorrhagic stroke (aHR, 2.012; 95% CI, 1.220 to 3.318; $p < 0.001$).

Conclusion:

Patients with ADPKD were associated with increasing cardiovascular events compared with general population in Taiwan. Thus multidisciplinary teams should guide the assessment, treatment and holistic care of ADPKD patients.