

FACULTAD CIENCIAS DE LA SALUD

PROGRAMA ESPECIALIZACIÓN EN CARDIOLOGÍA

**CARACTERÍSTICAS IMAGENOLÓGICAS POR ANGIOTOMOGRAFÍA
CORONARIA EN PACIENTES DE UN PROGRAMA DE TRASPLANTE RENAL EN
BARRANQUILLA - COLOMBIA**

Línea de investigación: Factores de riesgo en enfermedad cardiovascular

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RESUMEN

La enfermedad cardiovascular es la principal causa de morbilidad y mortalidad en pacientes con enfermedad renal crónica. En los pacientes trasplantados, la enfermedad arterial coronaria aumenta el riesgo de muerte y pérdida del injerto en 2,7 veces; esta condición es más común en el primer año después del trasplante.

Objetivo: Describir las características imagenológicas por angiotomografía de la enfermedad coronaria en los pacientes con enfermedad renal crónica en el programa de trasplante renal de una clínica de cuarto nivel en la ciudad de Barranquilla-Colombia.

Metodología: Se realizó un estudio analítico, retrospectivo, transversal, se tomaron las historias clínicas del programa de pretrasplante a todos los pacientes que requirieron valoración por el servicio de cardiología, se les realizó angiotomografía, con la finalidad de evaluar CAD-RADS, Carga de Placa y Tipo de Placa por segmento arterial coronario. Se realizó asociación entre estas variables a través de un χ^2 o un test exacto de Fisher, según el caso. Se realizó un análisis de frecuencia, y representación porcentual de acuerdo con el tipo de variable.

Resultados: La población estuvo conformada por 236 pacientes de los cuales 80 cumplieron criterios de inclusión y exclusión. La proporción sexual fue de dos mujeres por cada tres hombres, es decir con una representación del 60% hombres. La edad promedio fue de 56 ± 6.1 años sin diferencia significativa entre los sexos (W: 855; p-valor: 0.3948). La HTA fue la comorbilidad más frecuente. El 92% de los pacientes estaban en TRR. El 67.35% de los pacientes tenían CAD-RADS entre 1 y 2, con unas cargas de placa Leve (53.06%) a moderada (22.56%), se encontró asociación entre estos dos parámetros (p: 0.0000). En cuanto al tipo de placa relacionado con la Carga de placa no se evidenció relación entre estas dos variables (p > 0.05), siendo los tipos de placa más frecuentes el Calcifica y Fibrocalcifica No Alto Riesgo.

Conclusiones: Aunque el 45% de los pacientes no presentaron lesiones arteriales coronarias. En aquellos que se encontraron lesiones coronarias, no se evidenció un patrón específico de carga de placa o tipo placa o un segmento afectado, lo que de acuerdo con los grados de estenosis son tan bajos encontrados lleva a pensar que no se ha instaurado un síndrome renocardiaco.

Palabras clave: Angiotomografía coronaria; CAD-RADS; Carga de Placa; Trasplante renal, enfermedad cardiovascular, enfermedad renal crónica.

ABSTRACT

Cardiovascular disease is the leading cause of morbidity and mortality in patients with chronic kidney disease. In transplant patients, coronary artery disease increases the risk of death and graft loss by 2.7 times; this condition is most common in the first year after transplant.

Objective: To describe the imaging characteristics of coronary artery disease by CT angiography in patients with chronic kidney disease in the kidney transplant program of a fourth-level clinic in the city of Barranquilla-Colombia.

Methodology: An analytical, retrospective, cross-sectional study was carried out, the medical records of the pre-transplant program were taken from all the patients who required evaluation by the cardiology service, they underwent angiotomography, with the purpose of evaluating CAD-RADS, load of Plaque and Plaque Type by coronary artery segment. An association was made between these variables through a χ^2 or Fisher's exact test, depending on the case. An analysis of frequency and percentage representation according to the type of variable was performed.

Results: The population consisted of 236 patients, of which 80 met the inclusion and exclusion criteria. The sexual proportion was two women for every three men, that is, with a representation of 60% men. The average age was 56 ± 6.1 years with no significant difference between the sexes ($W: 855$; p -value: 0.3948). Hypertension was the most frequent comorbidity. 92% of the patients were on RRT. 67.35% of the patients had CAD-RADS between 1 and 2, with Mild (53.06%) to moderate (22.56%) plate loads, an association was found between these two parameters ($p: 0.0000$). Regarding the type of plaque related to plaque load, there was no evidence of a relationship between these two variables ($p > 0.05$), with the most frequent types of plaque being Calcific and Fibrocalcific Non-High Risk.

Conclusions: Although 45% of the patients did not present coronary artery lesions. In what coronary lesions were found, there was no evidence of a specific pattern of plaque load or plaque type or an affected segment, which according to the degrees of stenosis found are so low that it leads to think that arenocardiac syndrome has not been established.

Keywords: Coronary angiotomography; CAD-RADS; Plate Load; Kidney transplant, cardiovascular disease, chronic kidney disease.

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