Body Mass Index-Mortality Paradox in Hemodialysis: Can It Be Explained by Blood Pressure?

To the Editor:

The recent article by Agarwal,1 which described an investigation of the association of the prevalence and control of blood pressure with obesity, concluded that leaner patients on dialysis had a higher prevalence of hypertension, poorer control of hypertension, a greater left ventricular mass index, and greater evidence of excess extracellular fluid volume. The author suggests that these associations may be attributed to differences in the manner in which overweight patients sequester excess fluid volume; however, nothing was said about the residual volume of urine produced by the patients. We have observed that many patients undergoing hemodialysis maintain a daily diuresis volume that is quite variable. In our experience, >40% of patients with chronic renal failure exhibit residual diuresis in the first years after starting hemodialysis treatment.2,3 The maintenance of residual diuresis in both patients undergoing peritoneal dialysis and those undergoing hemodialysis has been shown to influence various clinical parameters, including nutritional status.4 We reported recently that patients without diuresis may have different left ventricular morphologies and/or different values of peripheral resistance and cardiac output when compared with those patients with diuresis.5 The presence or absence of diuresis was not taken into account by the author and could have been an important confounding factor not measured that could explain the paradox described.

Disclosures

None.

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