Epidemiology of renal and cardiovascular risk factors in Toba aborigines

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RESUMEN

Objectives. To detect, educate, and control cardiovascular (CVD) risk factors, diabetes mellitus, hypertension, obesity, central obesity, and renal damage markers such as glomerular filtration rate (GFR) and proteinuria within a population of Toba aborigine people who live in the outskirts of Resistencia city, Chaco Province, Argentina. Methods. A sample was selected from four Toba communities. Blood and urine samples were drawn in their own homes. Proteinuria was considered positive when a urinary protein/urinary creatinine rate (uPr/uCr) ≥ 0.20. GFR was estimated by Levy formula, and the stages of chronic kidney disease (CKD) were as defined in the National Kidney Foundation Guidelines. Results. In all, 385 subjects were included, 36% males, mean age=36.1 years old. The prevalence of CVD risk factors was as follows: hypertension in 97 (25.2%), proteinuria in 84 (21.8%), CKD in 93 (24.2%) [Stage 1 in 26 (6.8%), Stage 2 in 46 (12%), and Stage 3 in 21 (5.5%)]. No subjects showed CKD Stage 4 or 5. Being overweight was found in 129 (33.5%), obesity in 82 (21.3%), central obesity in 190 (49.4%), and diabetes in 8 (2.1%). The presence of CKD was associated with an increased prevalence in central obesity, hypertension, and diabetes, but not obesity. The adjusted relative risk for proteinuria was 2.79 (p ≤ 0.008) in subjects of at least 45 years of age, compared to subjects under 25 years. Conclusions. This group of aborigines showed a high prevalence of proteinuria and CVD risk factors and CKD not related to diabetes.

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