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Summary

ASSOCIATION OF CONTROLLED ATTENUATION PARAMETER AND LIVER STIFFNESS WITH CHRONIC KIDNEY DISEASE IN PATIENTS WITH DIABETES MELLITUS

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In 324 patients with diabetes mellitus, hepatic steatosis measured by controlled attenuation parameter and fibrosis measured by liver stiffness were not associated with chronic kidney disease risk, while age and hypertension were independent risk factors.

KEY POINTS

- Among 324 diabetic patients enrolled between January and August 2023, 8.9% had chronic kidney disease defined as eGFR less than 60 mL/min/1.73m^2
- Steatosis markers including CAP (273±55 vs. 276±50 dB/m), fatty liver index, and hepatic steatosis index showed no significant differences between patients with and without CKD
- Fibrosis markers including liver stiffness (7.0±2.2 vs. 7.0±3.8 kPa), FIB-4, and NAFLD fibrosis score were not different between CKD and non-CKD groups
- Multivariate analysis identified age (OR 1.047, 95% CI 1.008-1.088) and hypertension (OR 3.260, 95% CI 1.274-8.339) as independent risk factors for CKD in this diabetic population
- This cross-sectional study may be relevant to clinicians managing diabetic patients with suspected NAFLD who are assessing CKD risk

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