Author's Accepted Manuscript

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PII: S1053-2498(17)31902-2

DOI: http://dx.doi.org/10.1016/j.healun.2017.07.011

Reference: HEALUN6563

To appear in: Journal of Heart and Lung Transplantation

Cite this article as: Rahatullah Muslem, Kadir Caliskan, Sakir Akin, Kavita Sharma, Nisha A. Gilotra, Jasper J. Brugts, Brian Houston, Glenn Whitman, Ryan J. Tedford, Dennis A. Hesselink, Ad J.J.C. Bogers, Olivier C. Manintveld and Stuart D. Russell, Pre-operative proteinuria in left ventricular assist devices and clinical outcomePredictive value of proteinuria in CF-LVAD patients, *Journal of Heart and Lung Transplantation*, http://dx.doi.org/10.1016/j.healun.2017.07.011

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ACCEPTED MANUSCRIPT

Pre-operative Proteinuria in Left Ventricular Assist Devices and Clinical Outcome.

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Running title: Predictive value of proteinuria in CF-LVAD patients anuscill

Conflict of interest (all authors): none.

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Abstract

Background - This study evaluated the association of pre-operative proteinuria before CF-LVAD implantation in relation to mortality and the need for RRT during the first year of follow-up.

Methods – A retrospective, multicenter cohort study was conducted, evaluating all CF-LVAD patients (n=241) implanted in the two participating tertiary referral centers. Patients were included if they had a urine dipstick performed within 7 days before CF-LVAD implantation. Proteinuria was defined as ≥ trace.

Results – In total, 173 (72%) patients were included (mean age 52.3 ± 13.3, 78% male, mean estimated GFR 60.1 ± 25.9 mL/min per 1.73 m²). Forty-two patients (24%) had pre-operative proteinuria. The observed 3months and 1-year survival in patients with proteinuria vs. without proteinuria was 57% vs 86% and 52% vs. 78% (Log-rank p < 0.001), respectively. In addition, during the first year post-implantation, 32% of the patients with proteinuria and 15% of the patients without proteinuria required RRT (Log-rank p = 0.02). Multivariate Cox-regression analysis confirmed that pre-operative proteinuria was an independent predictor for mortality

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