PROGNOSTIC UTILITY OF CALCULATED PLASMA VOLUME STATUS IN CHRONIC HEART FAILURE

Abstract 104 Figure 1

Conclusions Calculating plasma volume status in CHF patients appears prognostically useful and suggests that dehydration is better tolerated than volume excess in these individuals and that targeting therapy to achieve a plasma volume status ≈178 ml might increment survival.

CLINICAL AND ECHOCARDIOGRAPHIC DETERMINANTS OF N-TERMINAL PRO B-TYPE NATRIURETIC PEPTIDE LEVEL IN PATIENTS WITH STABLE CHRONIC OBSTRUCTIVE AIRWAYS DISEASE: A PROSPECTIVE OBSERVATIONAL STUDY OF 140 PATIENTS

Background The vitamin D-parathyroid (PTH) axis is increasingly recognised as potentially being involved with many of the features of the syndrome of CHF. We wanted to explore the relationship between vitamin D and markers of severity.

Methods We analysed serum 25(OH) vitamin D3 levels in 406 consecutive attendees of the Leeds Advanced Heart Failure clinic (510 men) and correlated these to clinical markers of severity.

Results Mean age (SE) was 69 (3) years, mean left ventricular ejection fraction (LVEF) 31 (2%), mean serum creatinine 117 μmol/l (2.4), median vitamin D levels (IQR) 30 (20–45) nmol/l (normal for skeletal health >75 nmol/l) and median parathyroid levels 8.8 (6.2–13.5) pmol/l (normal <6.3 pmol/l). Aetiology was ischaemic...