中文題目: 膽固醇和中風病患 30 天死亡率的相關

英文題目: Cholesterol levels are associated with 30-day mortality from ischemic stroke in dialysis patients

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Background: End-stage renal disease patients on dialysis are at elevated risks of stroke and death from stroke. We investigated the impact of serum cholesterol levels on ischemic stroke mortality in dialysis patients.

Methods: From the Taiwan Stroke Registry data, we identified 46770 ischemic stroke cases, including 1101 dialysis patients and 45669 non-dialysis patients from 2006 to 2013. Cox proportional hazards regression models were used to evaluate the hazard ratio (HR) of 30-day mortality after ischemic stroke by serum total cholesterol levels on admission.

Results: Overall, the 30-day mortality was 1.46-fold greater in the dialysis group than in the non-dialysis group (1.75 vs. 1.20 per 1000 person-days). The mortality rates were 1.64, 0.62, 2.82, and 2.23 per 1000 person-days in dialysis patients with serum total cholesterol levels of < 120 mg/dL, 120-159 mg/dL, 160-199 mg/dL, and \geq 200 mg/dL, respectively. Compared to dialysis patients with serum total cholesterol levels of 120-159 mg/dl, the corresponding adjusted HRs of mortality were 4.18 (95% CI = 1.01-17.3), 7.82 (95% CI = 1.96-31.2) and 6.85 (95% CI = 1.59-29.6) for those with cholesterol levels of < 120 mg/dl, 160-199 mg/dl and \geq 200 mg/dl, respectively. For non-dialysis patients, there was no significant association between 30-day death risk and serum total cholesterol levels after adjustment of age, comorbidities, and stroke severity.

Conclusions: Dialysis patients with serum total cholesterol levels of ≥ 160 mg/dl or < 120 mg/dl on admission are at an elevated hazard of 30-day mortality after ischemic stroke.