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Risk factors for contrast induced nephropathy: a study among Italian patients.

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Abstract

This study aimed to make a profile of patients at highest risk of developing contrast induced nephropathy (CIN) in order to take appropriate prevention measures. 591 patients undergoing coronary procedures were divided into two groups: patients with (CIN-group) and without (no-CIN) an increase in creatinine level equal or more than 25% from baseline values within 24-48 h after the coronary procedure. All patients underwent an accurate anamnesis, objective exam, hematochemical measurements, and diagnostic exams. The results of this study while confirming that, average age ($p = 0.01$), diabetes mellitus ($p < 0.0001$), base line renal insufficiency ($p = 0.0001$), diuretic therapy ($p = 0.002$), higher contrast doses ($p = 0.01$), are associated with a higher risk of contrast-induced nephropathy, also demonstrated that both clinical ($p = 0.01$) and subclinical ($p < 0.0001$) atherosclerosis, and higher preprocedural high sensitive C-reactive protein levels (hs-CRP) ($p = 0.02$) are risk factors for CIN.