Conclusion: The CAPD with low T3 syndrome is correlated PWK, and the CAPD patients with low T3 syndrome show increased arterial stiffness.

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0213
Influence of Peritonitis on Gastrointestinal Function of Patients with Continuous Ambulatory Peritoneal Dialysis
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Objective: To explore the influence of peritonitis on CAPD patients of gastrointestinal symptoms and gastric myoelectric activity, and to explore the correlation between gastrointestinal symptoms and gastric myoelectric activity.

Methods: 72 patients were selected, including 24 patients with suffering peritonitis (group A), 24 patients with having suffered and cured peritonitis 3 months ago (group B), and 24 normal CAPD patients (group C) as the control group. All cases were evaluated subjectively with Gastrointestinal Symptom Rating Scale (GSRS). The gastric myoelectric activity was assessed by cutaneously recorded electrogastrographs (EGGs) in the resting state.

Results: (1) The incidence of gastrointestinal symptoms in group A, group B and group C was respectively 91.67%, 70.83% and 54.17%. (2) GSRS scale scores of patients in group A in abdominal pain, dyspepsia and gastrointestinal reflux were significantly higher than that of group B and C (P < 0.01). GSRS scale scores of group B in dyspepsia, constipation, abdominal pain and eating dysfunction were higher than group C, although were no significant difference (P > 0.05). (3) The gastric electrical frequency (2.5-3.7 cpm) percentage before a meal and after standard meal in group A was significantly lower than that of group B and group C (P < 0.05), and in group C was higher than that in group B (P < 0.05). (4) The variance of EGG dominant frequency and power after a standard meal in group A and group B were less decreased, compared with the changes of group C (P < 0.05).

Conclusion: The peritonitis can significantly increase the incidence of gastrointestinal symptoms in CAPD patients, and the effects can exist for a long time. The abnormal gastric myoelectric activity in patients with PDAP and the disorders of gastrointestinal function can be correlated between, and the electrogastrogram can be an important means of gastrointestinal function evaluation in CAPD patients.

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0214
1,25(OH)2D3 Inhibits High Glucose-induced Apoptosis and ROS Production in Human Peritoneal Mesothelial Cells through MAPK/P38 Pathway
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Objective: 1,25(OH)2D3 plays an important role in the regulation of cell proliferation, cell differentiation and immunomodulation. However, its function on apoptosis and oxidative stress in human peritoneal mesothelial cells (HPMCs) remain unknown. This study investigated whether 1,25(OH)2D3 protect high glucose (HG)-induced apoptosis and ROS production in HPMCs and examined the underlying molecular mechanisms.

Methods: We used HG stimuli to reproduce the damage of peritoneal injury in vitro, and examined the effect of 1,25(OH)2D3 on apoptosis and ROS production in HPMCs. The expressions of Bax, Bcl-2, phospho-P38 and P38 in HPMCs were evaluated by western blot analysis, and apoptosis was determined by analysis of FITC-Annexin V/PI staining. Intracellular accumulation of ROS was measured using 2, 7-dichlorofluorescein diacetate (DCF-DA).

Results: We found that HG increased apoptosis and ROS production, pre-treatment with 1,25(OH)2D3 significantly inhibited HG-induced HPMCs apoptosis and ROS production in HPMCs. Further analysis revealed that 1,25(OH)2D3 facilitated cell survival through MAPK/P38 pathway.

Conclusion: These results indicate that 1,25(OH)2D3 can inhibit apoptosis and ROS production in HG-treated HPMCs through MAPK/P38 pathway.

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0217
Association of Individual and Regional Socioeconomic Status on Initial Peritonitis and Outcomes in Peritoneal Dialysis Patients: A Propensity Score Matched Cohort Study
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Background: Socioeconomic status (SES) is known to influence the development and outcomes of peritonitis among peritoneal dialysis (PD) patients. However, the influences of SES on peritonitis and outcomes have not been well studied. We aimed to determine the association of individual and regional SES with peritonitis and outcomes using propensity score matched analysis.

Methods: We conducted a retrospective, multi-center cohort study in China to examine theses associations. We collected data on 2,171 PD patients from seven centers, and we created 1:1 propensity score matched pairs using the nearest neighbor method. We stratified the risk for initial peritonitis and outcomes, and Kaplan-Meier survival analysis to compare differences in peritonitis-free rates between different groups of participants after matching.

Results: A total of 563 (25.9%) initial episodes of peritonitis occurred during the study period. The Kaplan-Meier peritonitis-free rate curve showed high-income patients had a significantly lower risk than low-income patients (p = 0.007) after matching for age, hemoglobin, albumin, and regional SES and PD center. The risk of treatment failure was significantly lower in the high-income than the low-income group after matching for the organism causing peritonitis and PD center: OR = 0.27 (0.09-0.80, p = 0.018). Regional SES and education were not associated with initial peritonitis and outcomes.

Conclusion: Our study demonstrates low individual income is a risk factor for the initial onset of peritonitis and treatment failure after initial peritonitis.

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0218
Arcanobacterium pyogenes bacteremia in a Man on Hemodialysis with Central Venous Catheter
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Objective: Arcanobacterium pyogenes itself is a well-known zoonotic pathogen. Reports of human infections are rare. Here we describe a case of A. pyogenes infection by blood culture, in a hemodialysis (HD) patient with central venous catheter (CVC) without typical epidemiological exposure. Characteristics of human infection with A. pyogenes are also presented.

Methods: Here we describe a case in a 54-year-old man, who depending on HD by a permanent CVC and with no identified animal contact, presented with catheter-related infection caused by Arcanobacterium pyogenes.

Results: Blood cultures from both the CVC and peripheral site were obtained. Standard biochemical bacteriological testing confirmed A. pyogenes. The patient was treated with vancomycin 0.5 g every 8 hours plus cefazoxime 3.0 g once daily.