

## Physician - Experimental Researches

[MSB-09]

### The Impact of Renal Functions on Mortality in Patients Undergoing Surgery for Infective Endocarditis

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**Turk Gogus Kalp Dama** 2024;32(Suppl 2):MSB-09

Doi: 10.5606/tgkdc.dergisi.2024.msb-09

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Received: August 24, 2024 - Accepted: September 29, 2024

**Objective:** This study aimed to provide clinicians with valuable information on the prognostic importance of renal function tests in the management of infective endocarditis (IE) patients and to guide potentially more effective perioperative interventions.

**Methods:** In this study, the relationship between renal function tests and mortality in patients who underwent surgical treatment for IE between March 2020 and November 2023 was retrospectively examined. A total of 100 patients over the age of 18 were included in the study.

**Results:** Patients who experienced mortality had significantly higher creatinine levels (1.8 vs. 1.2 mg/dL,  $p=0.02$ ) and lower glomerular filtration rates (53.4 vs. 82.1 mL/min/1.73 m<sup>2</sup>,  $p=0.01$ ). C-reactive protein levels were higher in the mortality group, but the difference was not statistically significant.

**Conclusion:** The results indicate that renal functions are directly related to mortality in disease groups with high mortality, such as IE. Therefore, we believe that performing the operation after correcting renal functions, obtaining a nephrology consultation, and planning the operation under optimal treatment, except in very urgent conditions, can reduce mortality.

**Keywords:** Infective endocarditis, renal function, mortality.

<b>Table 1.</b> Comparison of inflammatory markers and renal function between survival and mortality groups			
Parameter	No mortality (n=66)	Mortality (n=34)	p-value
CRP (mg/L)	77.9±78.3	92.5±82.7	0.24
Creatinine (mg/dL)	1.2±1.0	1.8±1.3	0.02
GFR (mL/min/1.73 m <sup>2</sup> )	82.1±35.4	53.4±32.4	0.01