To the Editor,

We thank Barreto et al. for their interest in our publication and for their important comments. The association of vascular calcification with mortality in pre-dialysis CKD remains incompletely understood because of the limited amount of information. The study described in the letter showed that vascular calcification was not an independent predictor of mortality in subjects with pre-dialysis CKD mainly of stages 2–4. We were unable to evaluate the association of abdominal aortic calcification with mortality because of the small number of deaths in our patient population during the follow-up period. Recently, Watanabe et al. [1] showed a significant association of coronary artery calcification (CAC) with mortality in pre-dialysis CKD patients, but again, the small number of deaths did not permit a multivariate analysis. This prevented confirmation of an independent association of the CAC score with mortality. In contrast, Chiu et al. [2] found an independent relationship between the severity of CAC and all-cause mortality in patients with early-stage CKD due to diabetic nephropathy. Given these findings, we agree that prospective studies with larger sample sizes are needed to address this issue adequately.

Conflict of interest statement. None declared.

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