INTRODUCTION AND AIMS: Chronic kidney disease (CKD) has been associated with increased cardiovascular risk. Conventional echocardiographic indices and novel 2D speckle tracking (2DST), deformation related indices, are considered to be a suitable diagnostic utility for the evaluation of subclinical left ventricular (LV) dysfunction and are preserved in patients with increased cardiovascular risk. Lampros Michalis1, Lampros Lakkas1, Katerina Naka1, Aris Bechlioulis1, Anila Duni2, Ioannis Gkirdis1, 

METHODS: Novel 2DST echocardiographic indices, after dipyridamole infusion, were assessed. Dipyridamole use caused an increase in E and A wave, and a decrease in filling pressure and time to twist. Kirklin and Rutherford classification was also assessed.

RESULTS: Dipyridamole-induced changes in DecT were different between CKD and controls. While in CKD patients, time to untwist was decreased only in CKD patients while DecT was impaired. 

CONCLUSIONS: Dipyridamole-induced changes in DecT were different between CKD and controls. While in CKD patients, time to untwist was decreased only in CKD patients while DecT was impaired.
Conclusions: We conclude that genetic background determines the very early renal expression of inflammatory molecules in our model of kidney fibrosis. These early expression pattern differences could determine the progression of renal disease.

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