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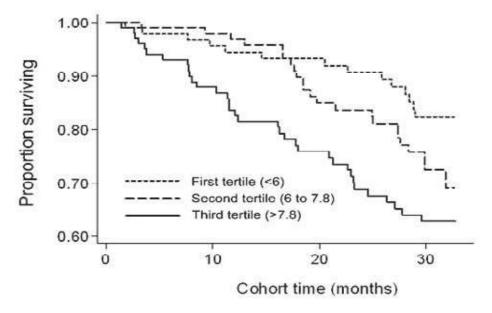
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# ASSOCIATION OF SOLUBLE ENDOTOXIN RECEPTOR CD14 AND MORTALITY IN HEMODIALYSIS (HD) PATIENTS (PTS)

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CD14 is involved in innate immunity mediating cell activation & signaling in response to endotoxin. We hypothesized that elevated sCD14 in HD pts is associated inflammatory cytokine activation & increased mortality. We measured sCD14 level in a cohort of 310 HD pts. The mean sCD14 was  $7.24\pm2.45~\mu g/ml$ . Tumor necrosis factor- $\Box$  (TNF- $\Box$ ) was the strongest correlate of sCD14 (r=0.24, p<0.001) followed by interleukin (IL)-6 (r=0.18, p=0.002), ferritin (r=0.21, p=<0.001), transferrin (r=-0.19, p=<0.001). Over the 33 months follow-up, 71 pts died. Multivariable Cox analysis adjusted for case-mix & other nutritional/inflammatory confounders including serum TNF- $\Box$ , C-Reactive protein, & IL-6 showed that compared to lowest sCD14 tertile, sCD14 levels in the third tertile (>7.8  $\mu g/ml$ ) were associated with higher death risk (hazard ratio 1.94; 95% CI 1.01-3.75, p=0.04).



Thus, elevated sCD14 is positively related to markers of inflammation, negatively to nutritional status & an independent predictor of mortality. Further studies are needed to examine the usefulness of sCD14 in risk stratification & clinical decision-making process in HD pts.