

The Impact Of Chronic Kidney Disease On Vulnerability In Hospitalized Older Subjects

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Objectives: Vulnerability is an increasingly prevalent syndrome, carrying significant implications such as poor prognosis, dependency, and mortality among geriatric individuals. The VES-13, a validated and straightforward tool, proves effective in assessing these conditions. Chronic kidney disease (CKD) is associated with higher mortality in older adults. However, there is limited data regarding CKD's impact on unfavorable VES-13 scores, despite evidence showing its ability to predict functional decline and mortality.

Methods: Patients 60 years old and more were recruited from January 2012 to December 2019 at Central Veterans Hospital in Lodz, Poland. After the screening, 2860 patients (2036 women and 824 men) were enrolled in the analysis. VES-13 scale in the Polish version was accessed for all patients. CKD was defined as a glomerular filtration rate lower than 60 mL/min/1.73m2 according to BIS1 formula. Statistical analysis was performed using Statistica 13.1.

Figure 1. Flowchart of the study.

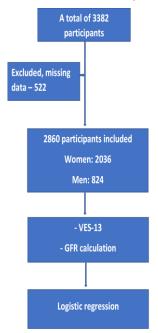


Table 1. General characteristics of study group.

Parameter	Women n = 2036	Men n = 824	p-Value
Age (mean ± SD)	81.7 ± 7.9	81.8 ± 8.3	p = 0.4 ^(U)
VES-13, points (mean ± SD)	6.78 ± 2.8	6.4 ± 2.9	p = 0.002 ^(U)
CKD, n, %	1331 (66.1%)	519 (63.6%)	p = 0.22 (chi2)

Figure 2. Logistic regression for VES-13 with cut-off point 3 pts in women

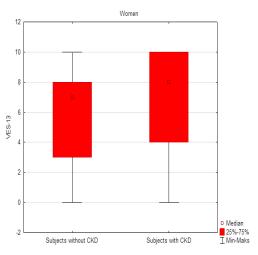
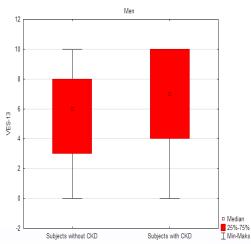


Figure 3. Logistic regression for VES-13 with cut-off point 3 pts in men



Conclusions: Hospitalized patients with CKD should primarily draw the attention of healthcare providers to the risks of functional decline.