Mehmet Agilli a, Tolga Dogan b, Mustafa Ilker Inan c, Gonca Fidan d

a Department of Biochemistry, Agri Military Hospital, Agri, Turkey
b Department of Internal Medicine, Gulhane Military Medical Academy, Ankara, Turkey
c Department of Chest Diseases, Girne Military Hospital, Girne, Cyprus
d Department of Infectious Diseases and Clinical Microbiology, Agri Military Hospital, Agri, Turkey

* Corresponding author.
E-mail address: mehmetagilli@yahoo.com (M. Agilli).

Reply to the Letter to the Editor: Is there any association between overhydration and inflammation in dialysis patients?

Respuesta a la carta al Editor: ¿Hay alguna asociación entre sobrehidratación e inflamación en los pacientes en diálisis?

Dear Editor,

We would like to thank Dr. Agilli for the comments and suggestions; we consider that they are interesting and in our opinion they improve the quality of our manuscript “Study of overhydration in dialysis patients and its association with inflammation”. 1

In our study, we have analyzed stable patients (as explained in the Methods) but it could have been explained with more detail.

Patient included had stable blood parameters to rule out other confounding factors. We did not include patients with active malignancy, major depression, anorexia nervosa, bulimia nervosa or any kind of inflammatory disorders. We did not take into consideration if patients had Helicobacter pylori infection or thyroid diseases, so we have to admit that this omission fact as a limitation in our study.

We do not usually prescribe dietary supplements such as vitamin C, vitamin A, zinc or omega-3 fatty acids; therefore in this study, patients were not receiving this type of treatment.

As we had excluded patients with inflammatory disorders, we cannot find a reason why patients had to receive corticosteroids agents. Progestational agents (Megestrol) are given to patients with anorexia to stimulate appetite in. In our study those patients were excluded.

The use of alcohol was not recorded, this is another limitation.

Blood parameters were taken before their dialysis sessions and after bioimpedance. Patients had to remain supine position for at least 10 min to perform bioimpedance. It is unlikely that patients are bedridden since they come from their home three times per week for dialysis. Patients admitted at the hospital were not included in the study.

Serum transthyretin concentration is not necessary affected by hydration status. However, as shown in our manuscript, patients with inflammation are overhydrated.

Conflict of interest

The authors declare no conflicts of interest.

Reference

Almudena Vega y Soraya Abad

Servicio de Nefrología. Hospital General Universitario Gregorio Marañón, C/ Dr. Esquerdo, 46, CP: 28007, Madrid, Spain

*Corresponding author: Tel.: +34 91 5868047; fax: +34 91 5868047. Correo electrónico: vega.almudena@gmail.com (A. Vega).

0211-6995/© 2015 Sociedad Española de Nefrología. Published by Elsevier España, S.L.U. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

http://dx.doi.org/10.1016/j.nefro.2015.06.024