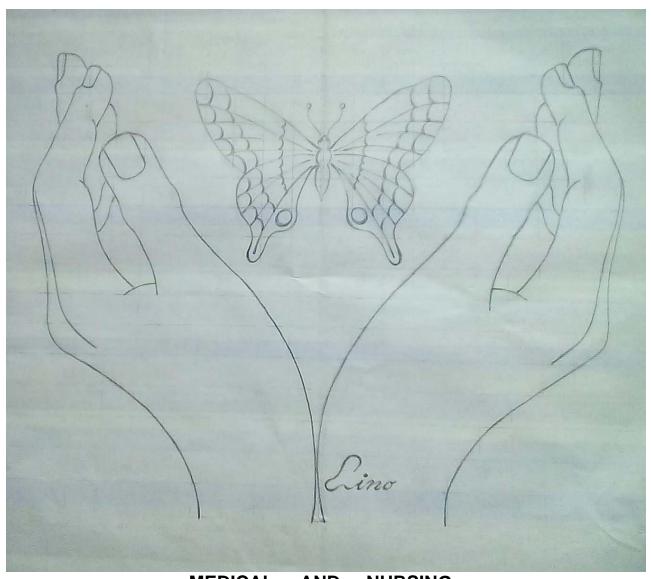
INTERNATIONAL JOURNAL OF MEDICAL AND NURSING APPROACH (IJMNA)

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Nutraceutical treatments for Hypercholesterolemia in dialysed patients.

* Marchitto N., * Stranges V., * Mobilia P., ** Pironti M., ** Curcio A., *** Raimondi G.

* AUSL Latina, Italy, ** AQMA Italia S.p.a. Milan, Italy

*** "Sapienza" University of Rome;

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Corresponding Authors: Marchitto N. e-mail: n.marchitto@ausl.latina.it

ABSTRACT

Background: Chronic renal failure (CRF) is an increasingly common disease in the elderly population. this disease often determines the need for dialysis treatment. Numerous studies show an increased cardiovascular risk and arrhythmic risk in dialysis patients. Our previous studies have shown that a specific diet improves the effect of dialysis but determines a reduction in HDL cholesterol with a consequent increase in cardiovascular risk in subjects who cannot take standard therapy with statins. **Aim:** The purpose of our study is to evaluate the effect of medronis cholesterol on the lipid profile and in particular on the HDL cholesterol value. **Materials and Methods:** our study involved 30 dialysis patients to evaluate changes in lipid profile before and after medronis cholesterol treatment. All patients will undergo non-invasive electrocardiographic recording in order to evaluate the effect of medronis cholesterol on autonomic tone. The Neuro-vegetative cardiovascular modulation was evaluated by EKG analysis of the Heart Rate Variability (HRV) before and after the treatment. The treatment is performed in two daily administration, for 1 month,). Data analysis software: Recorded data were analyzed with cardiolab xai-medica software for HRV linear analysis, and with kubios software for the HRV non-linear analysis. Statistical analysis: Statistical analysis was performed with SigmaStat 3.5 software for Windows. Paired T-test for quantitative variables were used to compare the effect of the treatment. Statistical significance was fixed at P < 0.05. Results: The results of our pilot study conducted on 10 patients allowed us to highlight a statistically significant reduction in total cholesterol not associated with a statistically significant variation in HDL cholesterol values. Normalization of total cholesterol in patients who cannot take standard statin therapy due to the severity of chronic kidney disease is a significant clinical advantage as it allows for a correction of cardiovascular risk. Discussion and Conclusion: The preliminary data in our possession underline the significant reduction in total cholesterol after only 1 month of therapy not associated with a statistically significant change in HDL cholesterol values. The small number of the sample currently under examination does not allow us to make a conclusive evaluation. However, further studies are underway to extend the statistical sample and verify any statistical significance.

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