POSTER PRESENTATION

Open Access

The effects of super-flux (high performance) dialyzer on the plasma glycosylated pro-B-type natriuretic peptide (proBNP) and glycosylated N-terminal proBNP in end-stage renal disease patients on dialysis

Yasuaki Nakagawa¹, Toshio Nishikimi^{1,4*}, Naoto Minamino³, Chinatsu Yamada¹, Kazuhiro Nakao¹, Takeya Minami¹, Yoshihiro Kuwabara¹, Hideyuki Kinoshita¹, Shinji Yasuno², Kenji Ueshima², Koichiro Kuwahara¹, Kenji Kangawa³, Kazuwa Nakao¹

From 6th International Conference on cGMP: Generators, Effectors and Therapeutic Implications Erfurt, Germany. 28-30 June 2013

Background

The current BNP immunoassay cross-reacts with glycosylated proBNP, and the NT-proBNP assay underestimates glycosylated NT-proBNP. In addition, the recently developed high performance dialyzer removes medium-sized molecular solutes such as β 2-microgloburin. We therefore investigated the effects of high performance dialysis on measured levels of glycosylated proBNP, glycosylated NTproBNP and other BNP-related peptides in end-stage renal disease (ESRD) patients on hemodialysis.

Method

We used our newly developed immunoassay to measure plasma total BNP, proBNP and mature BNP in 36 ESRD patients before and after hemodialysis. Plasma glycosylated NT-proBNP and nonglycosylated NT-proBNP were measured using Elecsys II after treatment with the deglycosylating enzymes neuramoinidase and O-glycosydase. We also measured plasma ANP and cGMP using radioimmunoassays.

Results

Total BNP (-38.9%), proBNP (-29.7%), mature BNP (-54%), glycosylated NT-proBNP(-45.5%), nonglycosylated

* Correspondence: nishikim@kuhp.kyoto-u.ac.jp

¹Department of Medicine and Clinical Science, Kyoto Univ. Graduate School of Medicine, Japan

Full list of author information is available at the end of the article



NT-proBNP(-53.4%), ANP(-50.4%) and cGMP(-72.1%) were all significantly reduced after hemodialysis. The relative magnitudes of the reductions did not correlate with any indices of plasma volume, but instead appeared to be molecular weight dependent. The proBNP/total BNP and glycosylated NT-proBNP/nonglycosylated NT-proBNP ratios were increased after hemodialysis. The proBNP/ total BNP ratio correlated positively with hemodialysis vintage and negatively with left atrial diameter and systolic blood pressure, whereas glycosylated/nonglycosylated NT-proBNP ratios correlated positively with parathyroid hormone levels.

Conclusion

These results suggest that plasma BNP and its related peptides measured immediately after hemodialysis may not be good indices of body fluid status in ESRD patients undergoing hemodialysis using a high performance dialyzer. ProBNP/total BNP may be influenced by hemodialysis vintage, cardiac afterload and diastolic function.

Authors' details

© 2013 Nakagawa et al; licensee BioMed Central Ltd. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

¹Department of Medicine and Clinical Science, Kyoto Univ. Graduate School of Medicine, Japan. ²Department of EBM Research, Kyoto University Hospital, Institute for Advancement of Clinical and Translational Science, Japan. ³Research Institute National Cardiovascular Research Center, Fujii Hospital, Japan. ⁴Department of Cardiology, Fujii Hospital, Japan.

Published: 29 August 2013

Reference

 Nishikimi T, Okamoto H, Nakamura M, Ogawa N, Horii K, Nagata K, Nakagawa Y, Kinoshita H, Yamada C, Nakao K, Minami T, Kuwabara Y, Kuwahara K, Masuda I, Kangawa K, Minamino N, Nakao K: Direct immunochemiluminescent assay for proBNP and total BNP in human plasma proBNP and total BNP levels in normal and heart failure. PLoS One 2013, 8:e53233.

doi:10.1186/2050-6511-14-S1-P47

Cite this article as: Nakagawa *et al.*: The effects of super-flux (high performance) dialyzer on the plasma glycosylated pro-B-type natriuretic peptide (proBNP) and glycosylated N-terminal proBNP in end-stage renal disease patients on dialysis. *BMC Pharmacology and Toxicology* 2013 14(Suppl 1):P47.

Submit your next manuscript to BioMed Central and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

BioMed Central

Submit your manuscript at www.biomedcentral.com/submit