C-reactive protein as a predictor of cardiovascular events in elderly patients with chronic kidney disease.

Few studies have evaluated the relationship between high-sensitivity C-reactive protein (hs-CRP) and vascular events in the elderly with chronic kidney disease (CKD). The association of hs-CRP with vascular events was examined according to CKD status in 3,166 participants of the Intervention Project on Cerebrovascular Diseases and Dementia in the Community of Ebersberg, Bavaria (INVADE study). CKD was defined as a creatinine clearance or<2.1 mg/L (median value). Vascular events were defined as a composite of myocardial infarction, stroke and vascular death. After 4 years of follow-up, 204 participants (6.4%) experienced a major cardiovascular event. High hs-CRP levels and CKD at baseline were associated with a greater risk of vascular events. Compared with patients with low hs-CRP and non-CKD, the adjusted hazard ratio (95% confidence interval) for vascular events was 1.42 (1.11-2.21) for low hs-CRP and CKD, 1.57 (1.21-2.34) for high hs-CRP and non-CKD and 1.93 (1.45-2.89) for high hs-CRP and CKD. These results suggest that high hs-CRP levels provide prognostic information in patients with CKD.