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### Clinical Significance of Elevated Levels of Cardiac Troponin T in Patients with Chronic Kidney Disease at Lagos University Teaching Hospital, Lagos

*Signification Clinique des Niveaux Élevés de Troponine Cardiaque dans les Patients Présentant la Maladie Rénale Chronique à l'Hôpital Universitaire de Lagos, Lagos*

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#### ABSTRACT

**BACKGROUND:** This is an observational study of pre-dialysis patients with Chronic Kidney Disease (CKD) attending nephrology clinic at Lagos University Teaching Hospital to determine the clinical significance of elevated levels of Cardiac Troponin T (CTT) and possible associated factors.

**METHODS:** One hundred and forty-three (143) patients with CKD and no prior history of myocardial infarction were recruited and their serum levels of CTT were determined within 3 months of sample collection and storage at -80° C. ECG findings and clinical variables were compared. The 99<sup>th</sup> percentile cut-off value was derived using healthy individuals that met the inclusion criteria.

**RESULTS:** Mean blood CTT level was significantly higher in CKD patients compared to the general population. The 99<sup>th</sup> percentile value derived in the reference sample population was 48.02pg/ml. Statistical analysis showed significant association of CTT elevation with left ventricular hypertrophy, decreased renal function and age.

**CONCLUSION:** CTT is generally elevated in pre-dialysis patients with CKD and a single elevated blood level of CTT above the 99<sup>th</sup> percentile may suggest asymptomatic Acute Coronary Syndrome. Serial rising levels of CTT and other clinical features will be of diagnostic significance in the diagnosis and management of asymptomatic acute coronary syndrome in patients with CKD. **WAJM 2022; 39(1): 3–10.**

**Keywords:** Cardiac Troponin T, Acute Coronary Syndrome, Chronic Kidney Disease, Left Ventricular Hypertrophy.

#### RÉSUMÉ

**CONTEXTE:** Étude observationnelle de patients pré-dialysés atteints d'une maladie rénale chronique (MRC) fréquentant une clinique de néphrologie de l'hôpital universitaire de Lagos afin de déterminer la signification clinique des niveaux élevés de troponine cardiaque T (TTC) et des facteurs associés possibles.

**METHODES:** Cent quarante-trois (143) patients atteints de MRC et aucun antécédent d'infarctus du myocarde ont été recrutés et leurs taux sériques de TTC ont été déterminés dans les 3 mois suivant le prélèvement et le stockage de l'échantillon à -80 °C. Les résultats de l'ECG et les variables cliniques ont été comparés. La valeur seuil du 99<sup>e</sup> centile a été calculée à partir de personnes en bonne santé qui répondaient aux critères d'inclusion.

**RESULTATS:** Le taux moyen de TTC dans le sang était significativement plus élevé chez les patients atteints de MRC que dans la population générale. La valeur du 99<sup>e</sup> centile calculée dans la population de l'échantillon de référence était de 48,02pg/ml. L'analyse statistique a montré l'association significative de l'altitude de TTC avec l'hypertrophie ventriculaire gauche, la fonction rénale diminuée et l'âge.

**CONCLUSION:** Le CTT est généralement élevé dans les patients de pré-dialyse atteints de MRC et un taux sanguin élevé simple de CTT au-dessus du 99<sup>e</sup> centile peut suggérer ACS qui n'a pas été remarqué. Les niveaux ascendants périodiques de CTT et d'autres dispositifs cliniques seront d'importance diagnostique dans le diagnostic et la gestion de ces patients atteints de MRC mais asymptomatique pour le syndrome coronaire aigu. **WAJM 2022; 39(1): 3–10.**

**Mots-clés:** Troponine cardiaque T, Syndrome coronarien aigu, Maladie rénale chronique, hypertrophie ventriculaire gauche.

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Abbreviations: CKD, Chronic Kidney Disease; CTT, Cardiac Troponin T.