Cardiac troponins used as diagnostic and prognostic tests in patients with kidney disease

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Record Status
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Citation

Authors' objectives
To systematically review the literature on the use of cardiac troponin levels in patients with chronic kidney disease (CKD) regarding four Key Questions (KQ): (1) diagnosis of acute coronary syndrome (ACS), (2) management decisions for ACS, (3) prognosis after presenting with ACS, and (4) risk stratification in patients without symptoms of ACS.

Authors' conclusions
Cardiac troponin elevations are associated with a worse prognosis for CKD patients with and without suspected ACS. However, the wide variation in assays and cutoffs, along with the lack of comparative studies, prevents clear conclusions about how this association should change management, compared with management based on clinical factors or evidence derived from the non-CKD population. Future research should compare various management strategies that incorporate measuring cardiac troponins in their algorithms, including using different cutoffs or assays. For this research to be effective, troponin assays and cutpoints need to be standardized and harmonized so that results can be pooled, compared, and applied in practice.

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