Baseline HbA1c in acute kidney injury after cardiac surgery

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To the Editor:

We read with great interest the article from Seohee Lee and the colleagues [1] in which they included 3625 patients who accepted cardiac surgery. They found that intraoperative hyperglycemia in patients with an elevated preoperative CRP level was significantly related to an increased risk of AKI after cardiac surgery.

There are many factors affecting postoperative acute kidney injury including age, diabetes mellitus, preoperative creatinine concentration, etc. [2].

Previous studies found that glucose fluctuations are related to oxidative stress, endothelial dysfunction, and inflammation, the pathogenesis of vascular damage. However, in addition to sustained hyperglycemia, glucose fluctuations also contribute significantly to endothelial impairment. And the level of HbA1c was used to illustrate this more accurately [3, 4]. Hence, we believe that the level of HbA1c of the groups should be included in the baseline variable and wonder whether this factor of groups is similar and unbiased.

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Declarations

Conflict of interest The authors declare that they have no conflict of interest.

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