Review of: "Echocardiographic Changes in Prevalent Hemodialysis Population Based on Cardiac Symptomatology"

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Potential competing interests: No potential competing interests to declare.

This study prospectively evaluated the importance of performing echocardiography in hemodialysis patients, even asymptomatic ones. It was observed that asymptomatic patients presented significant cardiac structural alterations and, when compared with symptomatic patients (based on classification), they had better control of blood volume, anemia, and greater lean mass. No differences were observed in relation to mortality and hospitalization between the groups studied.

Patients with chronic kidney disease are at high cardiovascular risk, and most of them are expected to have structural cardiac abnormalities when they start renal replacement therapy. The fact that some patients are asymptomatic may be related to the way symptoms were assessed as well as to the adaptation process that occurs over many years of kidney and heart disease. Therefore, I am not surprised by the abnormalities found in asymptomatic patients. However, the merit of the present study was to reinforce the need for routine cardiac assessment in all patients on dialysis regardless of symptoms.

In my opinion, outcome data such as mortality and hospitalization should not have been part of the results because the period analyzed was concomitant with the COVID-19 pandemic, which makes it very difficult to extrapolate the results to normal periods without a pandemic.

My suggestion would be to make other correlations between structural changes in the echocardiogram and events in dialysis sessions, such as hypotension, episodes of arrhythmia, cramps, and difficulty in reaching dry weight.

I would like to congratulate the authors for their work and hope that this initiative generates other data that will help in addressing cardiovascular disease in the dialysis population.