

Gender Calciuresis of Primary Care Patients

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A putative relationship between calciuresis, borderline hypertension and gender aging was invented here using blinded data of apparently healthy persons. Calciuresis was enrolled (n=90, ± 1 S.D.) and participants were classified by aging, drinking or smoking. Women's pregnancy or thyroid problems were also examined to avoid early decrease in bone mass.

Similar biomarkers were found in the male (n=35: 135 \pm 18/87 \pm 8.0 mmHg, aged 40 \pm 13 years) and female cohort (n=44: 122 \pm 19/78 \pm 8 mmHg, aged 43 \pm 13 years). Men or women showed 1.5 \pm 0.9 or 1.8 \pm 1.5 mmol calcium per g urine creatinine. Aging men tended to borderline hypertension (n=21: 144 \pm 20/90 \pm 9 mmHg, aged 50 \pm 7 years) without enhanced calciuresis even among alcohol users (55% of 21: 1.5 \pm 1 mmol/g, 145 \pm 9/88 \pm 9 mmHg, aged 51 \pm 13 years). Aging women tended to calciuresis (n=20: 2.9 \pm 0.2 mmol/g, 134 \pm 12/84 \pm 6 mmHg, aged 56 \pm 7 years) compared to younger non-pregnant women (n=24: 1.3 \pm 1.1 mmol/g, aged 36 \pm 7 years). Significant differences were also not found between smoking (14% of 44: 2.1 \pm 0.8 mmol/g) and non-smoking women (1.9 \pm 0.9 mmol/g). Overall, pregnant healthy women showed albuminuria with raised calciuresis (n=6: 44 \pm 6 mg/l, 3.0 \pm 1.3 mmol/g, 107 \pm 16/75 \pm 10 mmHg, aged 34 \pm 7 years). In addition, aging women characterized by intake of thyroid hormones showed enhanced calciuresis (n=11: 5.2 \pm 1.8 mmol/g, 127 \pm 15/83 \pm 15 mmHg, aged 60 \pm 6 years) and those had elevated LDL-cholesterol (159 \pm 13 mg/dl) despite normal regulation of thyroid function (0.1 mg L-thyroxin, TSH 0.9 \pm 0.5 μ U/ml). In summary, enhanced albuminuria and calciuresis were found with pregnant women and replacement therapy of calcium, cholecalciferol was beneficial.

Intake of thyroid hormones of aging hypercholesterolemic women triggered calciuresis so that lipid lowering strategy was adapted for aging women.