

TOTAL ALKALINE PHOSPHATASE AS A MARKER OF BONE REMODELING IN PATIENTES WITH MINERAL AND BONE DISORDES IN CHRONIC KIDNEY DISEASE

Priscilla Yun Kim¹ Fabiana Rodrigues Hernandes²

1 Médica formada pela Faculdade Santa Marcelina (FASM)
2 Prof.^a Dra. da Disciplina de Semiologia Médica e Nefrologia e Orientadora do Trabalho.
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Endereço para correspondência: e-mail: drafabi@hotmail.com

ABSTRACT

Mineral and bone disorder (MBD) is one of the main consequences of chronic kidney disease (CKD). In addition, the advancement of MBD is one of the main factors for the loss of bone mass. To monitor bone remodeling in CKD-MBD, total alkaline phosphatase (AF) measurement was used, but the value of this test may not correlate with bone remodeling, if there are associated liver diseases or bile duct diseases or if the value of gamma glutamyl transferase (GGT) if found increased. Therefore, the objective of this work was to demonstrate the importance of the associated assessment of total AF and GGT to better manage patients. This is a retrospective study and the patients evaluated were those who had a consultation with the Nephrology of AME - Santa Marcelina from January 1, 2018 to December 31, 2018. Demographic and laboratory data were collected, as well as a previous history of liver and/or biliary tract diseases. The result of the study showed that approximately 40% of patients, followed up in conservative, dialysis and transplant treatment, had alterations in GGT, showing that this enzyme is important to identify patients who have hepatic or biliary alterations. In the control of BMD-CKD, total AF was used as a marker of bone remodeling, however, in patients with alterations in GGT, values above normal were found due to the presence of hepatic or biliary alterations and for the follow-up of these patients, the ideal marker would be bone AF.

KEYWORDS: mineral and bone disorder of chronic kidney disease; alkaline phosphatase; gamma glutamyl transpeptidase.