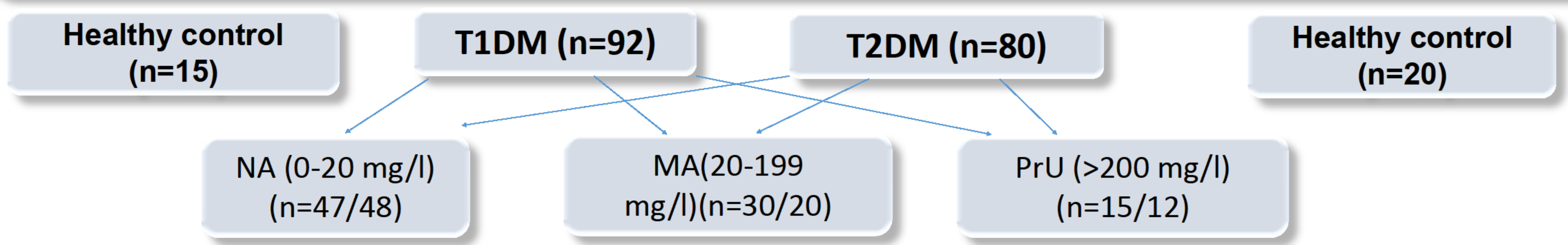


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Background and aims: Microalbuminuria (MA) is classical but not precise predictor of chronic kidney disease (CKD) in diabetes. For the purpose to find potential early risk markers we examined a panel of peptides in T1DM and T2DM patients.

Materials and methods:

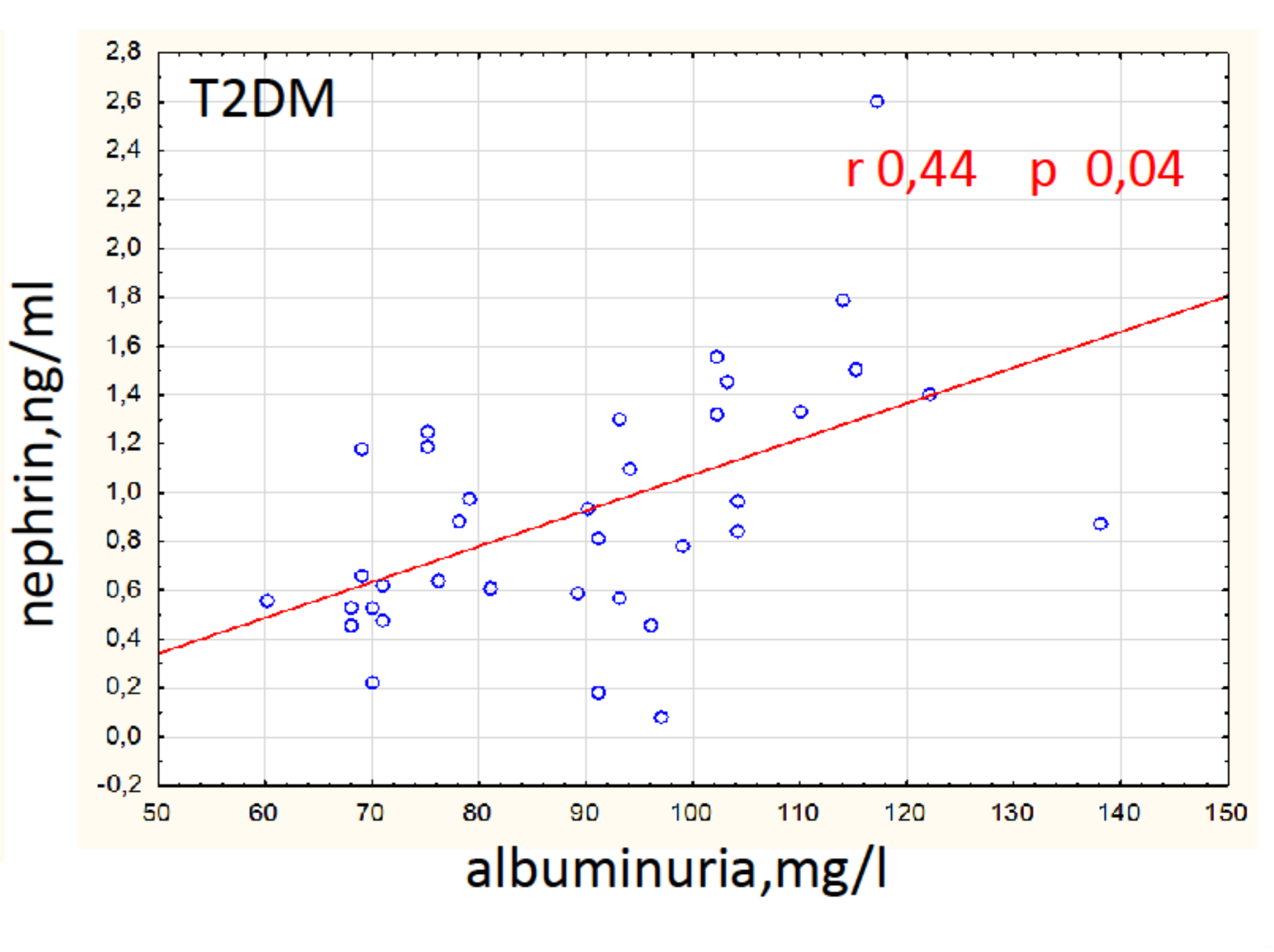
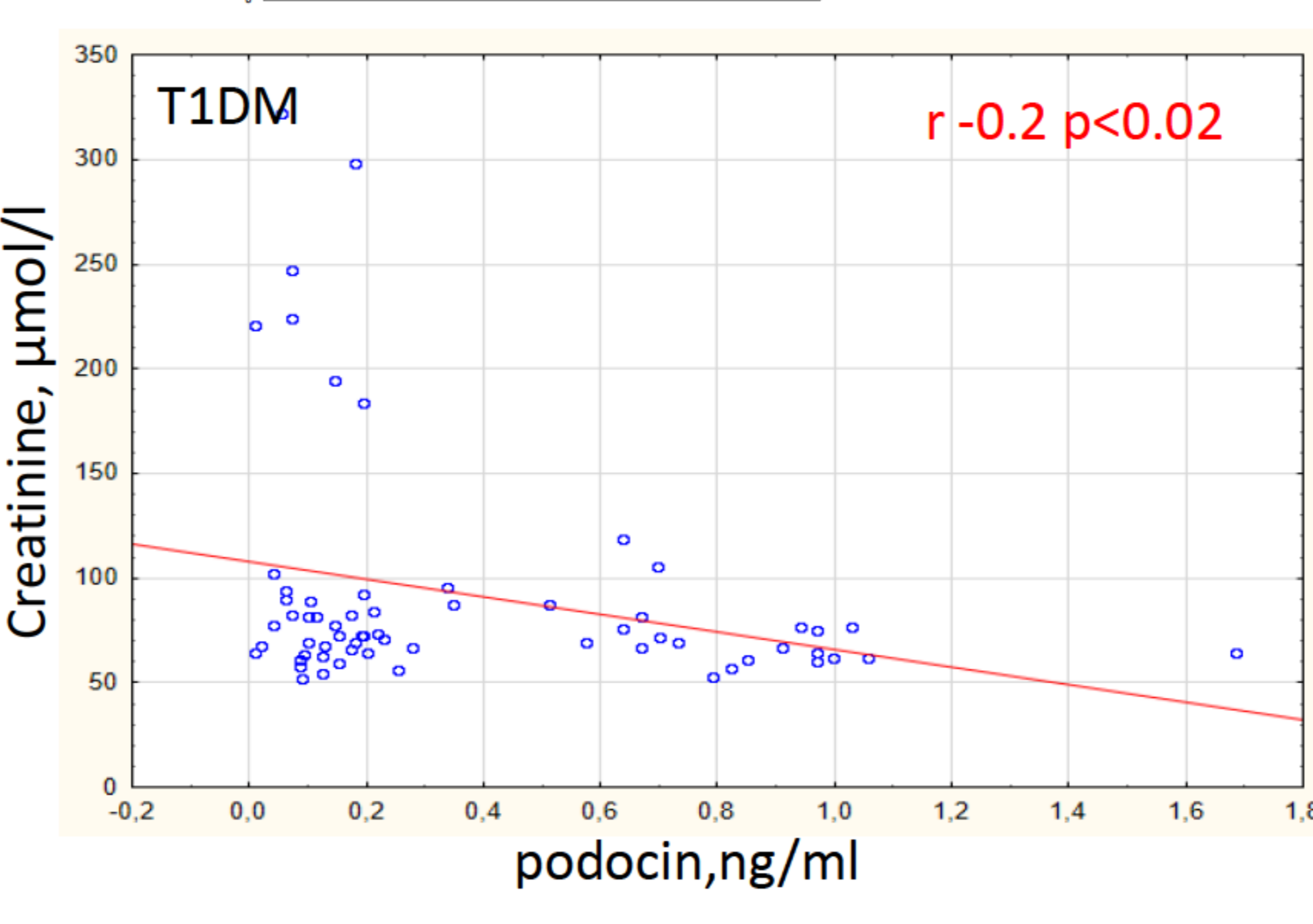
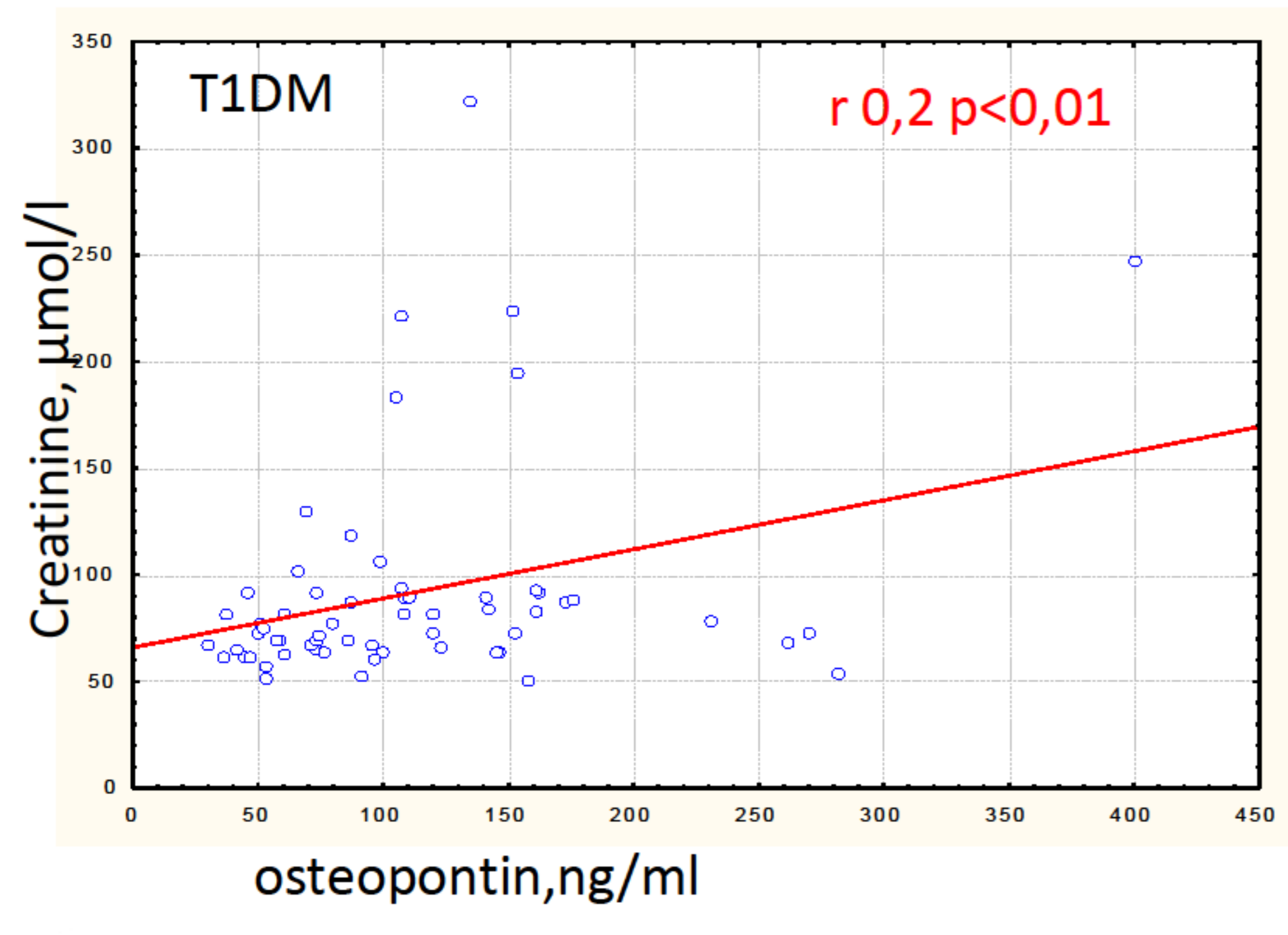
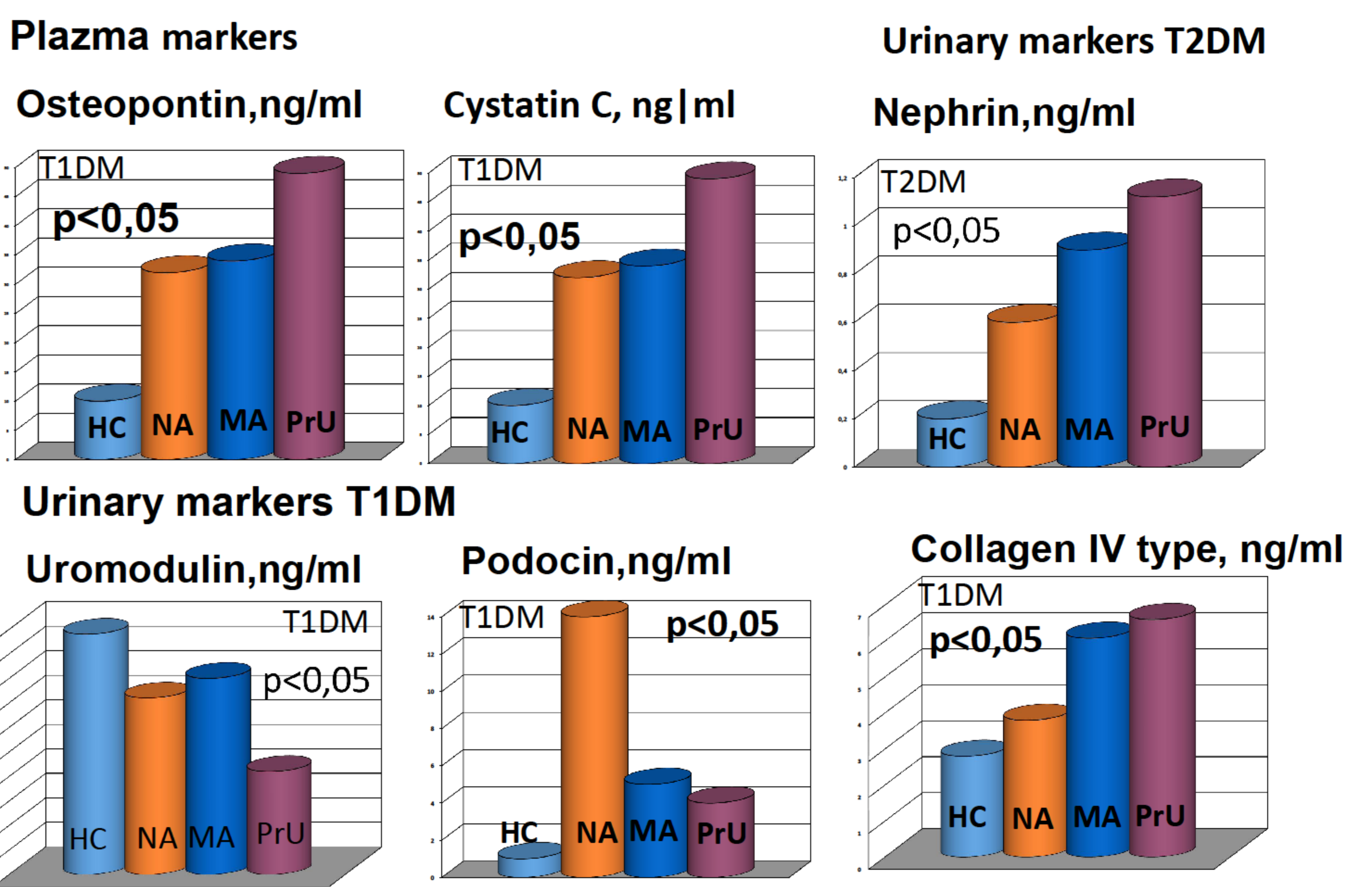
Overnight AER was assessed by immunoturbidimetry assay.
 Biomarkers of kidney damage were measured by enzyme-linked immunosorbent assay ELISA
 Plasma biomarkers: **NGAL, KIM-1, TIMP-1, osteopontin, cystatin C**
 Urinary biomarkers: **collagen IV, nephrin, podocin, cystatin C, KIM-1, NGAL, uromodulin**



Statistical analyses performed by STATISTICA 8.0, using a Mann-Whitney test, correlations were analyzed using Spearman correlation coefficients. Differences were considered significant at $p < 0.05$.

Results:

parameter	NA	MA	PrU	p
age (years)	33/63	35/68	31/63	NS
DM duration (years)	14/10	22/15	22/17	NS
Systolic BP /Diastolic BP (mmHg)	120/80 /125/80	120/80 /130/85	120/70 /125/85	NS
HbA1c, %	8,6/8,2	8,5/9,7	8,1/7,2	NS
Creatinine ($\mu\text{mol/l}$)	75/69	72/73	194/172	
eGFR($\text{ml}/\text{min}/1.73 \text{ m}^2$)	103/90	98/72	36/45	$p < 0,05$
Uric acid ($\mu\text{mol/l}$)	270/332	274/421	337/446	$p < 0,05$
Total cholesterol (mmol/l)	4,8/5,3	4,9/5,1	5,4/5,4	NS



CONCLUSION:

The biomarkers observed prior to MA let to consider them as a promising assay for the preclinical diagnostics of diabetic CKD.