



# KRONIČNA BUBREŽNA BOLEST

**KRONIČNA BUBREŽNA BOLEST  
JE OŠTEČENJE BUBREGA  
I/ILI SMANJENJE BUBREŽNE FUNKCIJE,  
TJ. GLOMERULARNE FILTRACIJE (<60  
ML/MIN/1.73M<sup>2</sup>) DULJE OD 3 MJESECA**

National Kidney Foundation Definition  
of Chronic Kidney Disease; 2002.

# Kronična bubrežna bolest

**Table 2.** Major Causes of Severe Chronic Kidney Disease.\*

Cause	Percent of Cases†
Diabetes mellitus	44.9
Type 1	3.9
Type 2	41.0
Hypertension	27.2
Glomerulonephritis	8.2
Chronic interstitial nephritis or obstruction	3.6
Hereditary or cystic disease	3.1
Secondary glomerulonephritis or vasculitis	2.1
Neoplasms or plasma-cell dyscrasias	2.1
Miscellaneous conditions‡	4.6
Uncertain or unrecorded cause	5.2

\* Data are from the U.S. Renal Data System.<sup>3</sup>

† The percentages are based on the incidence of reported end-stage renal disease according to the primary diagnosis.

‡ Examples of miscellaneous conditions are irreversible acute kidney injury and nephropathy associated with the acquired immunodeficiency syndrome.

# Stadij KBB i prevalencija

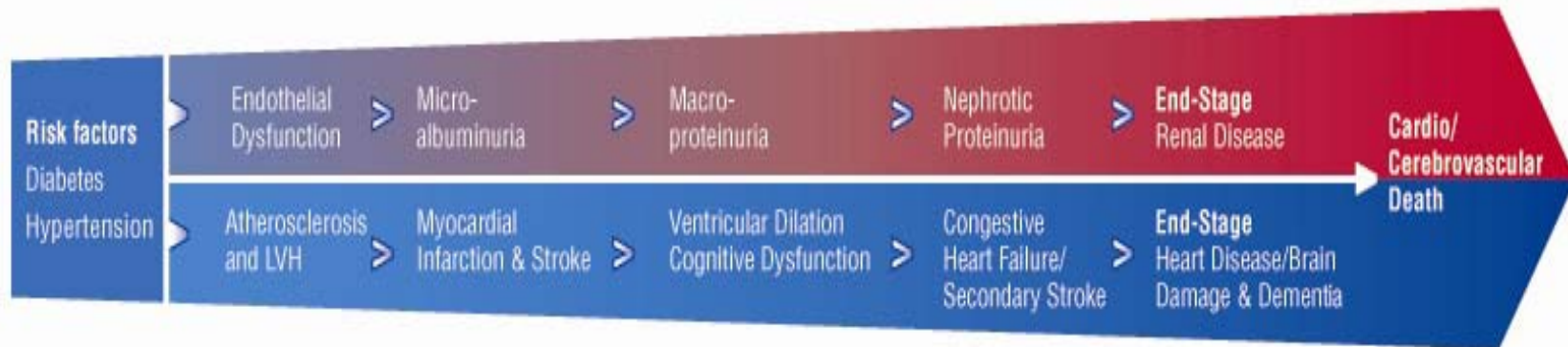
**Table 1. Stages of Chronic Kidney Disease and Prevalence in Adults.\***

Stage	Description	Estimated GFR† <i>ml/min/1.73 m<sup>2</sup></i>	Prevalence %	No. of Patients <i>millions</i>
I	Kidney damage with normal or increased GFR	>90	1.78	3.6
II	Kidney damage with small decrease in GFR	60–89	3.24	6.5
III	Kidney damage with moderate decrease in GFR	30–59	7.69	15.5
IV	Kidney damage with large decrease in GFR	15–29	0.35	0.7
V	Kidney failure with need for dialysis (end-stage renal disease)	<15	0.25	0.5

\* Data are from National Kidney Foundation guidelines,<sup>1</sup> Coresh et al.,<sup>2</sup> and the U.S. Renal Data System.<sup>3</sup>

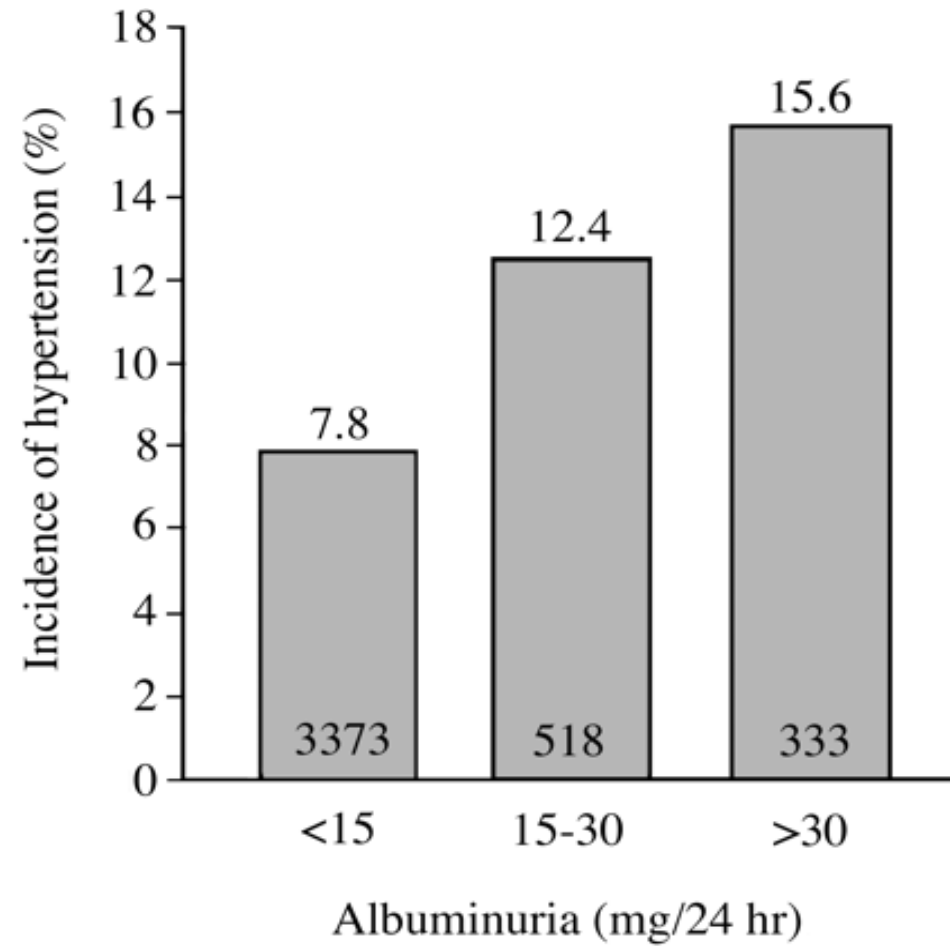
† The abbreviated Modification of Diet in Renal Disease (MDRD) formula was used to estimate the glomerular filtration rate (GFR).<sup>1,2,4</sup>

# Cardiovascular and Renal Continuum



Adapted from Dzau, Braunwald Am Heart J 1991;121:1244-1263.

# Hipertenzija i albuminurija





## Hipertenzija i albuminurija

**Table 1.** Factors known to influence the development of micro-albuminuria in subjects without diabetes

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- (1) Elevated blood pressure (systolic, diastolic, mean)
  - (2) Increased body mass index
  - (3) Endothelial dysfunction
  - (4) Decrease in high density lipoprotein levels
  - (5) Insulin resistance (hyperinsulinaemia)
  - (6) Smoking
  - (7) Salt sensitivity
  - (8) Increased age
  - (9) DD genotype of angiotensin
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# AKTIVNOST SIMPATIKUSA U KBB

