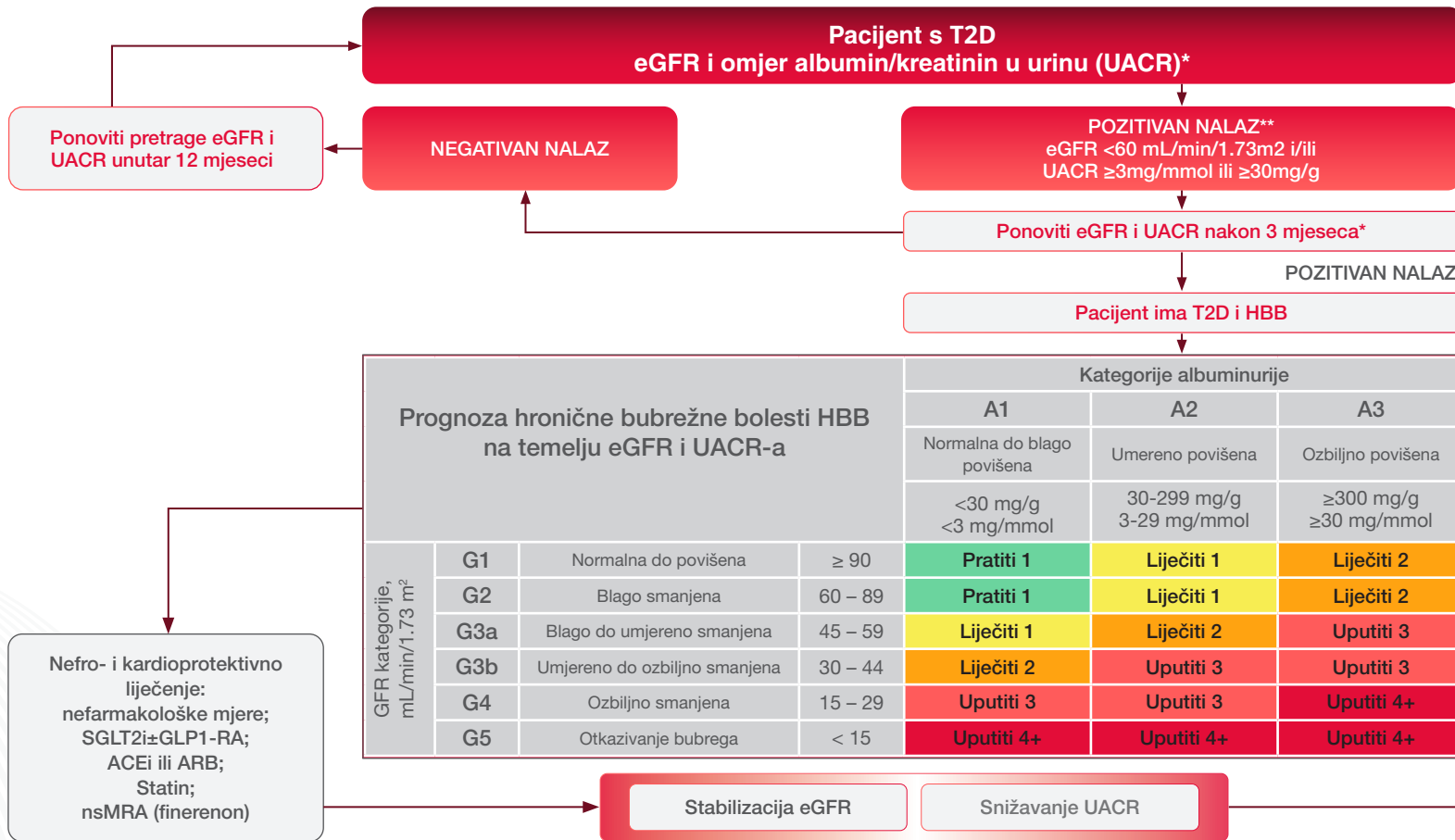




# Algoritam za rano otkrivanje i praćenje liječenja hronične bubrežne bolesti kod bolesnika sa dijabetesom tipa 2 (T2D)<sup>1-12</sup>



\*UACR ne određivati kod: infekcija ili upalnih procesa, povišene tjelesne temperature, intenzivne fizičke aktivnosti (24h prije uzimanja uzorka).  
Pri tumačenju nalaza u obzir uzeti: pušenje, nekontrolisanu hipertenziju, kongestivno zatajenje srca i ostala stanja (npr. Ortostatska proteinurija).  
\*\*Ako je UACR ≥ 70mg/mmol, ponovno uzimanje uzorka nije potrebno  
UACR - Urine Albumin-to-Creatinine Ratio

**Nizak rizik**  
Stabilna bolest ili bez HBB u nedostatku drugih markera oštećenja bubrega. Zahtijeva mjerenja jedanput (1) na godinu

**Umjereno povećan rizik**  
Zahtijeva mjerenja najmanje jedanput (1) na godinu

**Visok rizik**  
Zahtijeva mjerenja najmanje dvaput (2) na godinu

**Vrlo visok rizik**  
Liječenje uz savjetovanje s nefrologom  
Zahtijeva pažljivo praćenje / mjerenja najmanje tri do četiri (3-4) puta na godinu

Konsenzus radne skupine održane 30.5.2024. u sklopu projekta "Algoritam za rano otkrivanje i praćenje liječenja hronične bubrežne bolesti kod pacijenata sa dijabetesom tip 2". "Razvijeno u saradnji s članovima radne grupe: Topić G., Bubić D., Kovačević Preradović T., Kuprešak D., Savić S., Lovrić M., Risović I.  
HBB = hronična bubrežna bolest; T2D = dijabetes tipa 2; eGFR = procijenjena glomerulna filtracija; UACR = omjer albumin/kreatinin u urinu; ACEi = inhibitor konvertaze angiotenzina I; ARB = blokator AT2 receptora za angiotenzin II; GLP1-RA = agonist receptora peptida-1 sličnoga glukagonu; SGLT2i = inhibitor suprijenosnika za natrij i glukozu tipa 2; nsMRA = nesteroidni antagonist mineralokortikoidnih receptora

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STRUČNI POKROVITELJI:



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