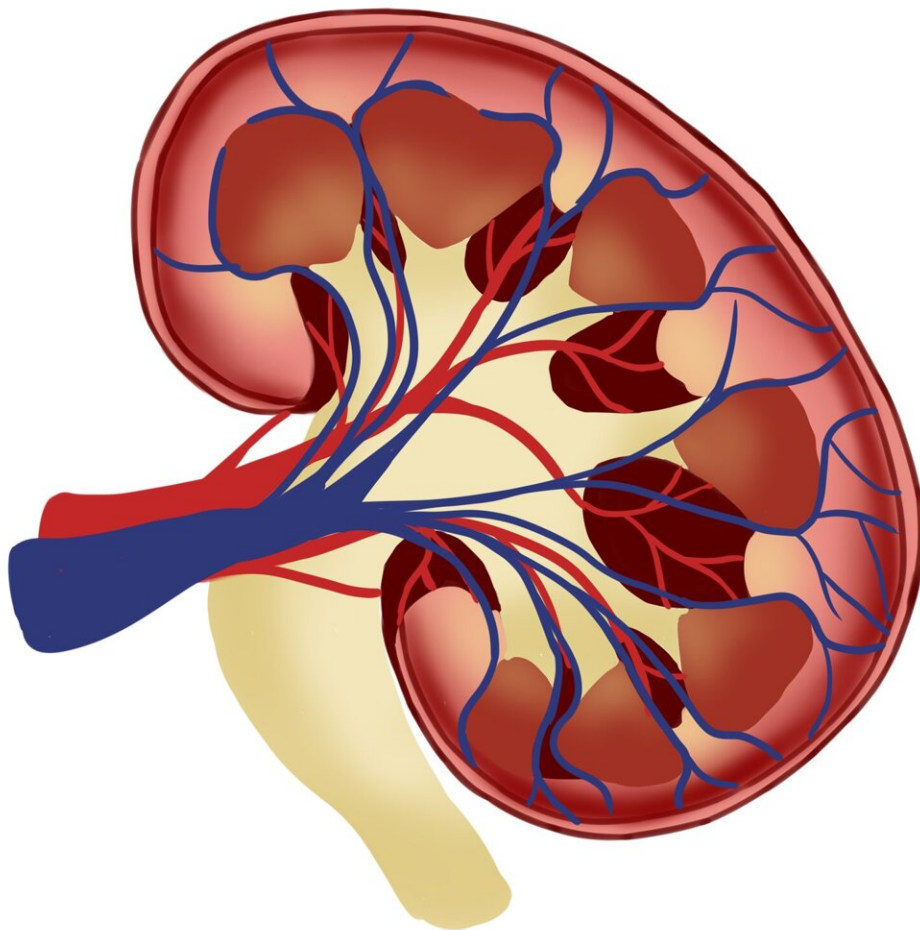


Lower levels of albuminuria associated with increased risk for chronic kidney disease progression and kidney failure

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A study of patients with chronic kidney disease (CKD) found a substantial excess risk for CKD progression and kidney failure as albuminuria (protein in the urine) increased, even at levels below 30 mg/g. These findings raise questions about the best time to start treatment to reduce protein in urine, and whether lowering albumin levels further could improve health outcomes in people with CKD who already have relatively low levels of albumin in their urine. The findings are published in *Annals of Internal Medicine*.

Albuminuria is a major risk factor for CKD progression, especially when categorized as moderate (30 to 300 mg/g) or severe (>300 mg/g). However, there are limited data on the prognostic value of [albuminuria](#) within the normal range.

Researchers from Boston University Chobanian & Avedisian School of Medicine studied 1,629 participants in the CRIC (Chronic Renal Insufficiency Cohort) study to estimate the increase in the cumulative incidence of CKD progression with greater baseline levels of albuminuria among persons with CKD who had normoalbuminuria (

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