

African ancestry contributes to kidney disease risk in Hispanics/Latinos

October 5 2016

African ancestry contributes to the risk of chronic kidney disease among some Hispanic/Latino adults, according to a study co-authored by Loyola University Chicago researchers.

The study by first author Holly Kramer, MD, MPH, and colleagues is published in the *Journal of the American Society of Nephrology*. Dr. Kramer is an associate professor in the Department of Public Health Sciences and in the Division of Nephrology and Hypertension of Loyola University Chicago Stritch School of Medicine.

The study included 12,226 U.S. Hispanic/Latino adults. Participants were examined for signs of kidney disease and for genetic variants indicating African ancestry - a sickle cell trait and two alternative forms of a gene called APOL1. (A person with [sickle cell trait](#) inherits one copy of a mutated gene, but does not get sickle cell disease, which requires copies from both parents.)

The study found that the African genetic variants were more common among Caribbean Hispanic/Latinos (including Puerto Ricans, Dominicans and Cubans) than among mainland Hispanics/Latinos. Hispanic/Latinos who had the African genetic variants were more likely to have albuminuria (an early sign of kidney disease) and/or a low glomerular filtration rate (a sign of decreased kidney function).

Researchers concluded that genetic variants that confer [chronic kidney disease](#) risk and are associated with African ancestry are also associated

with increased kidney disease risk among Hispanic/Latino adults.

More information: H. J. Kramer et al, African Ancestry-Specific Alleles and Kidney Disease Risk in Hispanics/Latinos, *Journal of the American Society of Nephrology* (2016). [DOI: 10.1681/ASN.2016030357](https://doi.org/10.1681/ASN.2016030357)

Provided by Loyola University Health System

Citation: African ancestry contributes to kidney disease risk in Hispanics/Latinos (2016, October 5) retrieved 20 September 2024 from <https://medicalxpress.com/news/2016-10-african-ancestry-contributes-kidney-disease.html>

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