Risk of chronic kidney disease following microscopic hematuria differs by sex

Design	Analysis	Results			
Retrospective Cohort study	Microscopic hematuria: ≥5 red blood cells/HPF	Multivariable-adjusted hazard rations (95% confidence interval) for incident chronic kidney disease			
Healthy adults who underwent regular health examinations N= 232 220	Measurement at 2 consecutive visits, 4 groups: (a) No hematuria at both visits (b) Hematuria followed by no hematuria (c) No hematuria followed by hematuria (d) Persistent hematuria	No hematuria	Regressed	Developed	Persistent
		women Ref (95% CI)	1.38 (0.89-2.13)	2.52 (1.86-3.41)	3.92 (2.88-5.34)
		Men Ref (95% CI)	2.80 (1.78-4.40)	4.44 (3.18-6.18)	8.34 (5.92-11.74)
4.8 years of follow-up	CKD: GFR<60 ml/min/1.73 m ² or proteinuria	• The association was stronger in men than in women			

CONCLUSION: Microscopic hematuria was associated with chronic kidney disease risk in both men and women. Persistent hematuria may help identify individuals at high risk for CKD.

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