





KIDNEY - CLEARANCE

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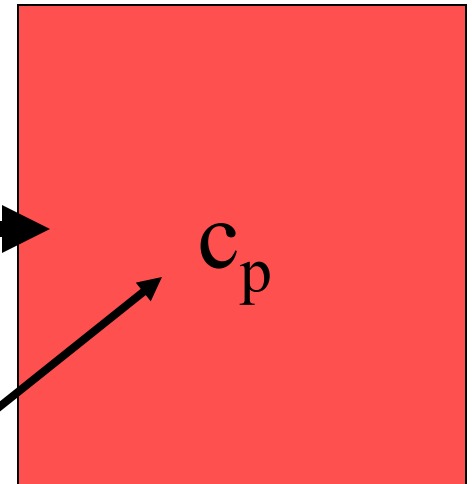
Clearance

is the proportion of substance amount excreted from the compartment (in a unit of time) to the concentration of a substance in the compartment.

Formally the clearance is considering the volume which is removed („cleared“) of a given substance in the time.

Clearance (2)

compartment
(plasmatic
space)



the concentration
of a substance
in compartment



the substance amount
excreted (in urine)
in given time



(3)

$$\text{Clearance} = \frac{V_u / t * c_u}{c_p} * 1000$$

$$= \frac{\text{ml / s} * \text{mmol / l}}{\text{μmol / l}} * 1000$$

$$= \text{ml / s}$$

Clearance (4)

$$\text{substance amount} = \text{volume} * \text{concentration}$$
$$n = V * c$$

$$\underbrace{V_p * c_p}_{\text{the substance amount in blood}} = \underbrace{V_u * c_u}_{\text{the substance amount in urine}}$$

(creatinine – a substance without „threshold“)

Clearance (5)

$$V_p * c_p = V_u * c_u$$

the volume is here understood as the volume of plasma in a unit of time: V / t
(it is so called „volume speed“ in ml / s, too)

$$V_p / t * c_p = V_u / t * c_u$$

$$V_p / t = \frac{V_u / t * c_u}{c_p} * 1000$$

Clearance (6)

$$V_p / t = \frac{V_u / t * c_u}{c_p} * 1000$$

„the volume of plasma that is completely cleared of a substance in a unit of time“

$$GF = \frac{V_u / t * c_u}{c_p} * 1000$$

glomerular filtration rate

Clearance *(note)*

$$V_p / t = \frac{V_u / t * c_u}{c_p} * 1000$$

In the (especially older) literature is the relation used sometime with the different symbolic, however with the identical meaning:

$$\text{clearance} = \frac{U * V}{P} * 1000$$

Clearance (7)

GF = 1,33 – 2 ml / s (glomerular filtration,
uncorrected)

V_u / t = the volume of definitive urine, excreted in a
time unit (dimension: ml / s)
diuresis (ml / d) : 86.400 → ml / s

c_p = the concentration of creatinine in plasma
(up to 115 $\mu\text{mol} \cdot \text{l}^{-1}$)

$V_u * c_u$ = dU-creatinine = 9 – 16 mmol / d

(s = second, d = day
1 d = 86.400 s = 24 * 60 * 60)

Glomerular filtration rate

$$GF_{\text{corrected}} = GF_{\text{uncorrected}} * \frac{1,73}{\text{body surface}}$$

Glomerular filtration is recalculated to the standard body surface = 1,73 m².

Body surface of investigated person is read in the table according to the height and weight or it is calculated from this valuables.

The importance of correction on the body surface

- the direct proportion:

body surface → surface of the kidney →

number of nephrons → function capacity of kidney

Tubular reabsorption of water :

$$R_{\text{H}_2\text{O}} = \frac{\text{GF} - V_u / t}{\text{GF}}$$

$$R_{\text{H}_2\text{O}} = 1 - \frac{V_u / t}{\text{GF}}$$

$$\begin{aligned} R_{\text{H}_2\text{O}} &= 0,988 - 0,997 \\ &= 98,8 - 99,7 \% \end{aligned}$$

(The uncorrected value of GF is used in the calculation)

The calculation of creatinine clearance, summary (1):

a/ the volume of urine excreted per 1 s:

$$V/t = \text{diuresis (ml)} : 86.400 \rightarrow (\text{ml/s})$$

b/ glomerular filtration rate (uncorrected):

$$\text{GFR} = \frac{U * V/t}{P} * 1000 \rightarrow (1,33 - 2 \text{ ml/s})$$

(U → mmol/L)
(V/t → ml/s)
(P → μmol/L)

c/ glomerular filtration rate corrected

$$\text{GFR}_{\text{corr}} = \text{GFR} * \frac{1,73}{\text{surface}} \rightarrow (\text{ml/s})$$

to the standard surface:

The calculation of creatinine clearance, summary (2):

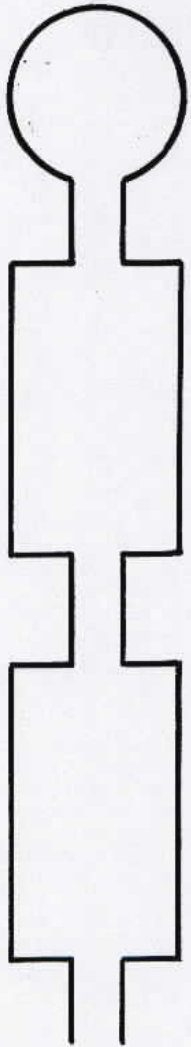
d/ tubular reabsorption:

$$R = \frac{GFR - V/t}{GFR} = 1 - \frac{V/t}{GFR} \quad (R_{H_2O} = 0.988 - 0.997)$$

e/ urine excretion of creatinine:

U * diuresis → (9 – 16 mmol/d) (diuresis → L)

Glomerular filtration and tubular secretion of different substances:

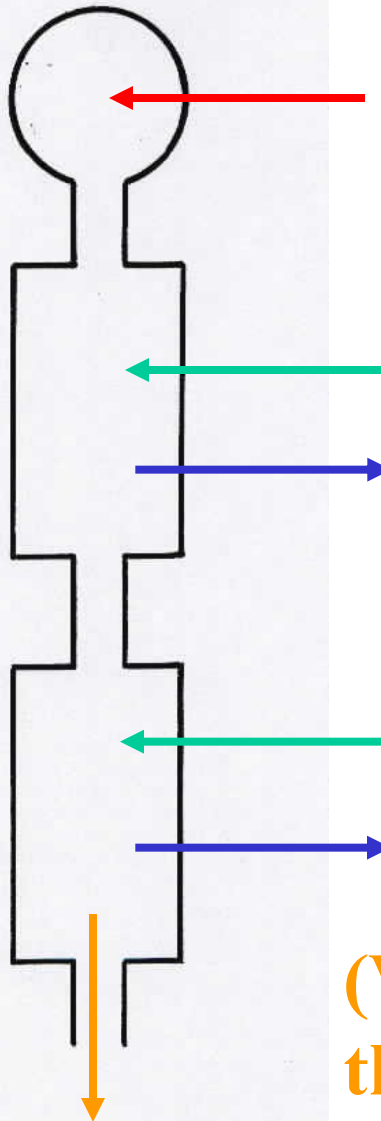


← **glomerulus**

← **proximal
tubule**

← **distal
tubule**

The excretion of a substance by kidney:



$(GF * c_p)$

the substance amount, filtrated in 1 s

tubular secretion (T_S)

tubular reabsorption (T_R)

$$V_{U/t} * c_U = GF * c_p + T_S - T_R$$

T_S

T_R

$(V_{U/t} * c_U)$

the substance amount excreted into the urine
in 1 s

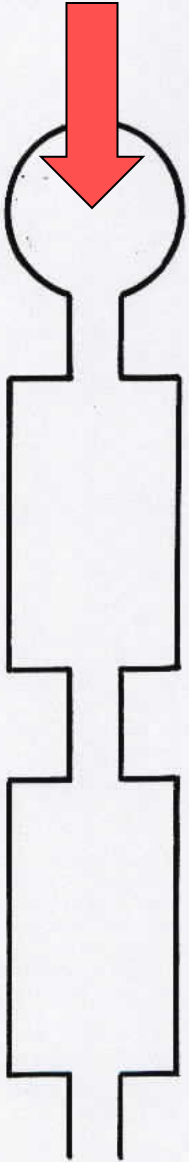
Fractional excretion

$$\mathbf{FE_{Na^+} = 0,01 \quad (= 1 \%)}$$

$$\mathbf{FE_{K^+} = 0,11 \quad (= 11 \%)}$$

$$\mathbf{FE_{H_2O} \leq 0,02 \quad (\leq 2 \%)}$$

compare: $\mathbf{R_{H_2O} = 0,988 - 0,997}$



Inulin:

Excreted exclusively by glomerular filtration. It is the exact measure of glomerular filtration (GF).

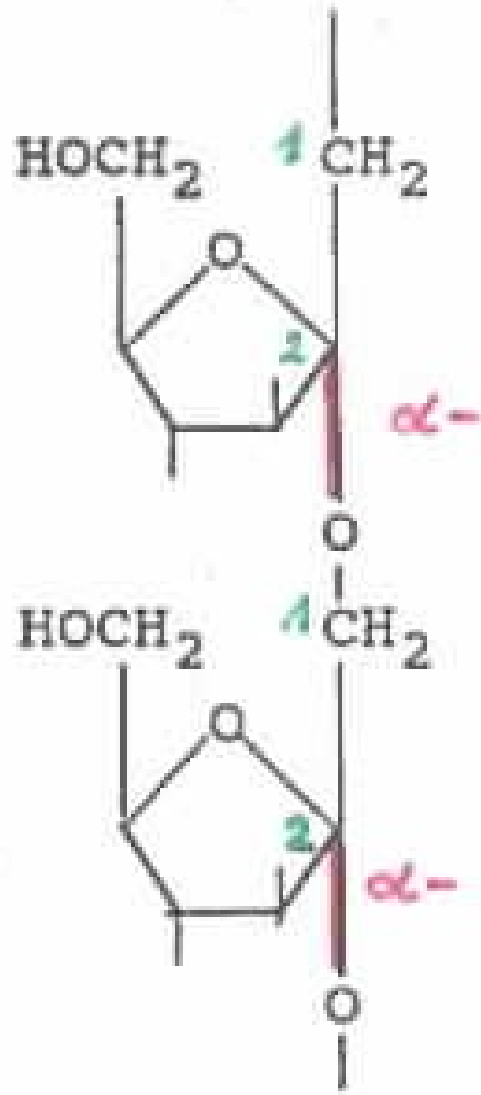
As a substance foreign to human body it must be infused intravenously. The sampling is possible till the steady concentration of inulin in plasma is reached.

Determinations were used for scientific research.

- inulin: $M_r \text{ INULIN} \cong 5.200$, bolus dose $50 \text{ mg} \cdot \text{kg}^{-1}$
→ infusion $P_{\text{INULIN}} \cong 200 - 300 \text{ mg} \cdot \text{l}^{-1}$
- synthetic polyfructan → lower M_r , identical conditions, soluble even in cold water

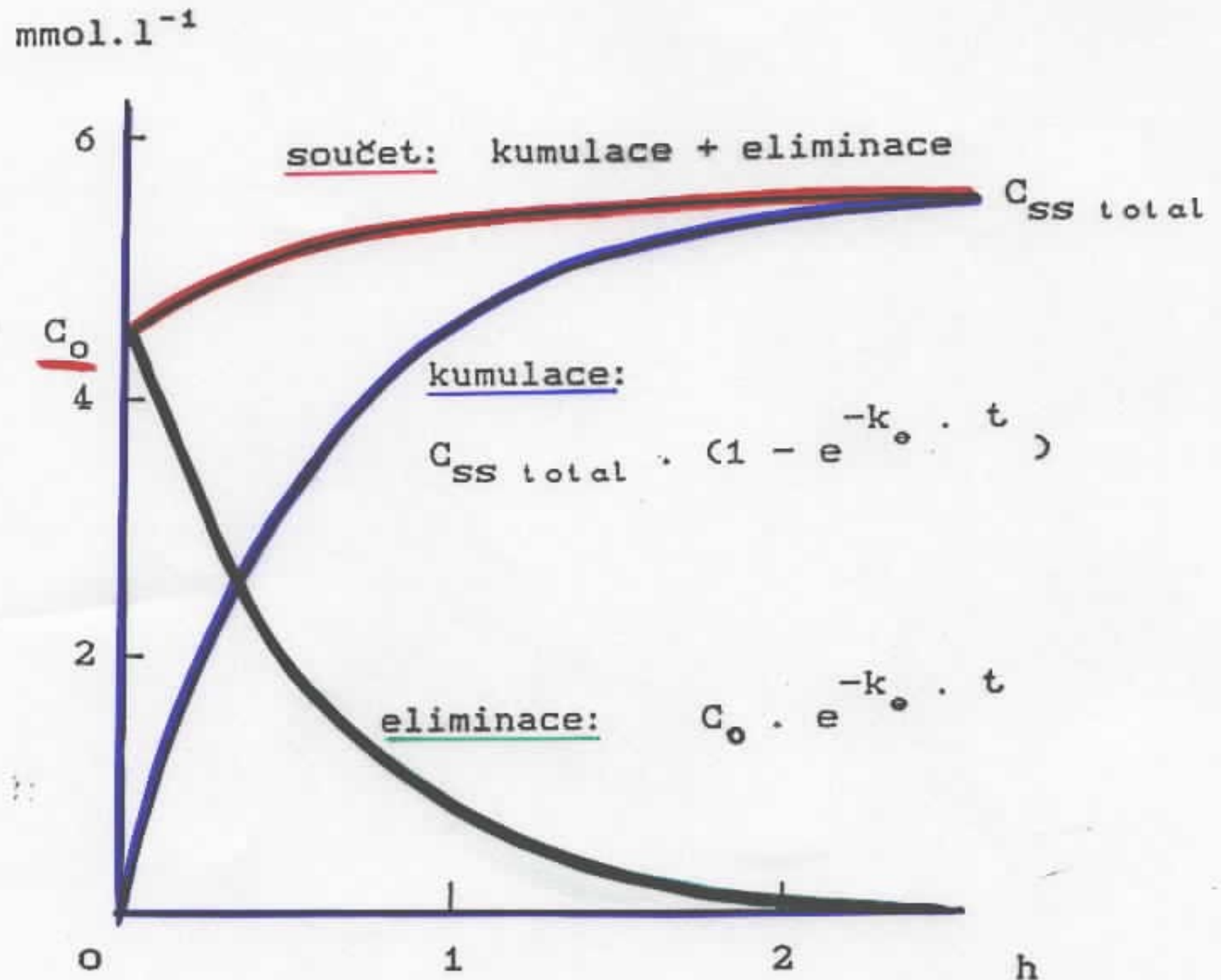


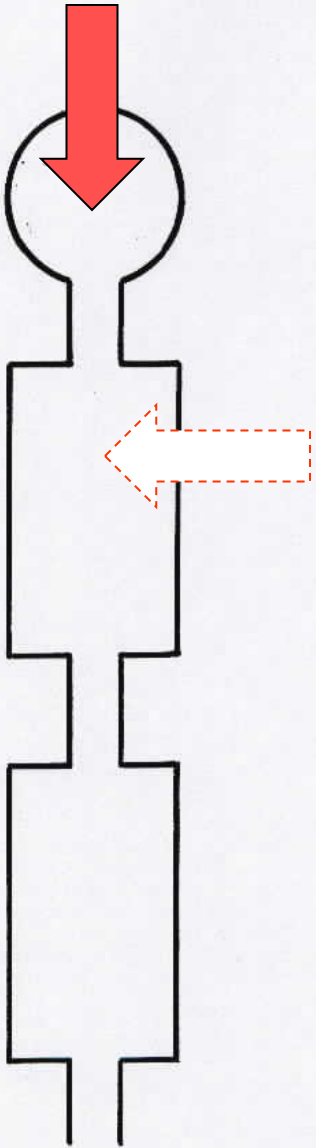
Oman pravý



inulin

The reaching of steady state:





Creatinine:

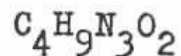
It is excreted mainly by glomerular filtration, but from small part by secretion in proximal tubule too. Therefore the creatinine clearance has the higher value in comparison with the inulin clearance (mentioned is 2,33 vs. 2,00 ml/s).

It is used for routine determinations of glomerular filtration rate.

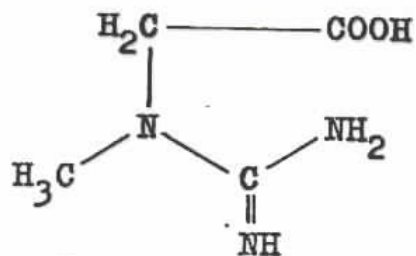
Gradually it is replaced with the determination of cystatin C.

Creatinine (anhydride of creatine) is considerably more soluble

Kreatin



$M_r = 131,13$

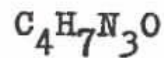


3-methyl-guanidino.octová kys.

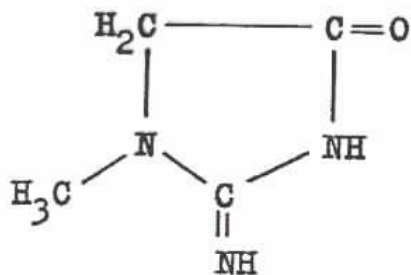
Rozpustnost v 1 kg vody
(18°C): 13,5 g

Slabě zásaditá látka.

Kreatinin



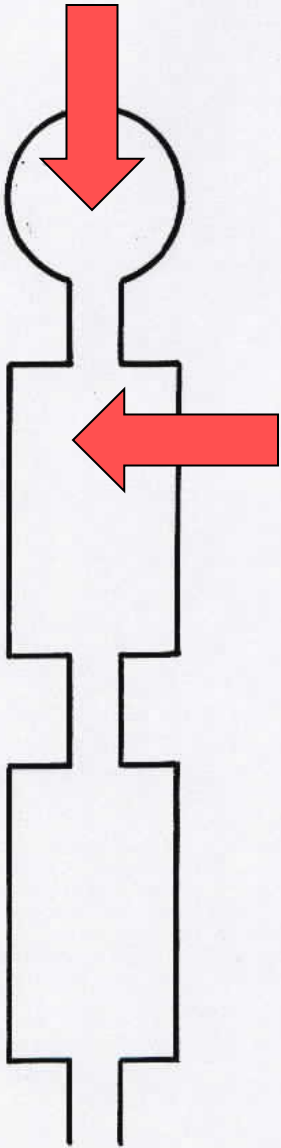
$M_r = 113,12$



anhydrid kys. 3-methyl-guanidino-octové

Rozpustnost v 1 kg vody
(16°C): 87 g

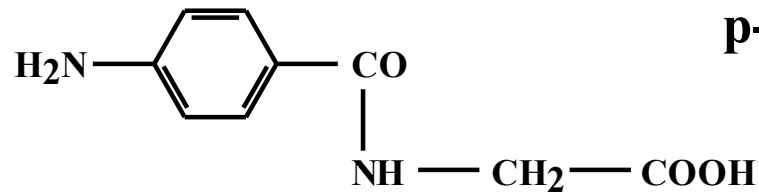
Silně zásaditá látka.



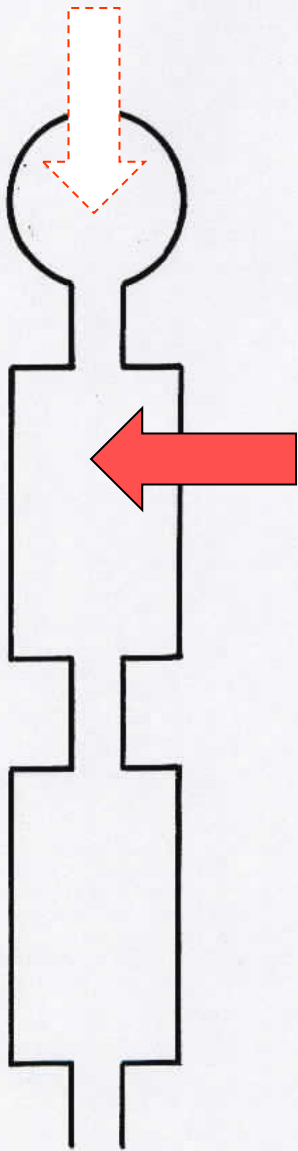
p-aminohippuric acid:

It is excreted both by glomerular filtration (GF) and by tubular secretion (T_s) (in the proximal tubule).

Its clearance (the sum $GF + T_s$) had given the blood amount, which pass through the kidney in the time unit.

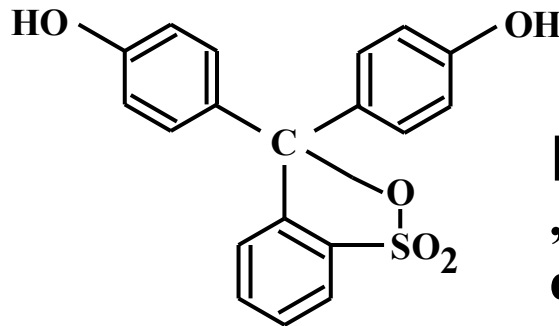


(p-amino.benzoyl.glycine,
p-amino.hippuric acid,
PAH)



Phenolsulfophtalein:

It is excreted mainly by tubular secretion (from 95 %). It is approximate indicator of secretion in the proximal tubule (T_s), resp. rate of blood flow through the proximal tubule.

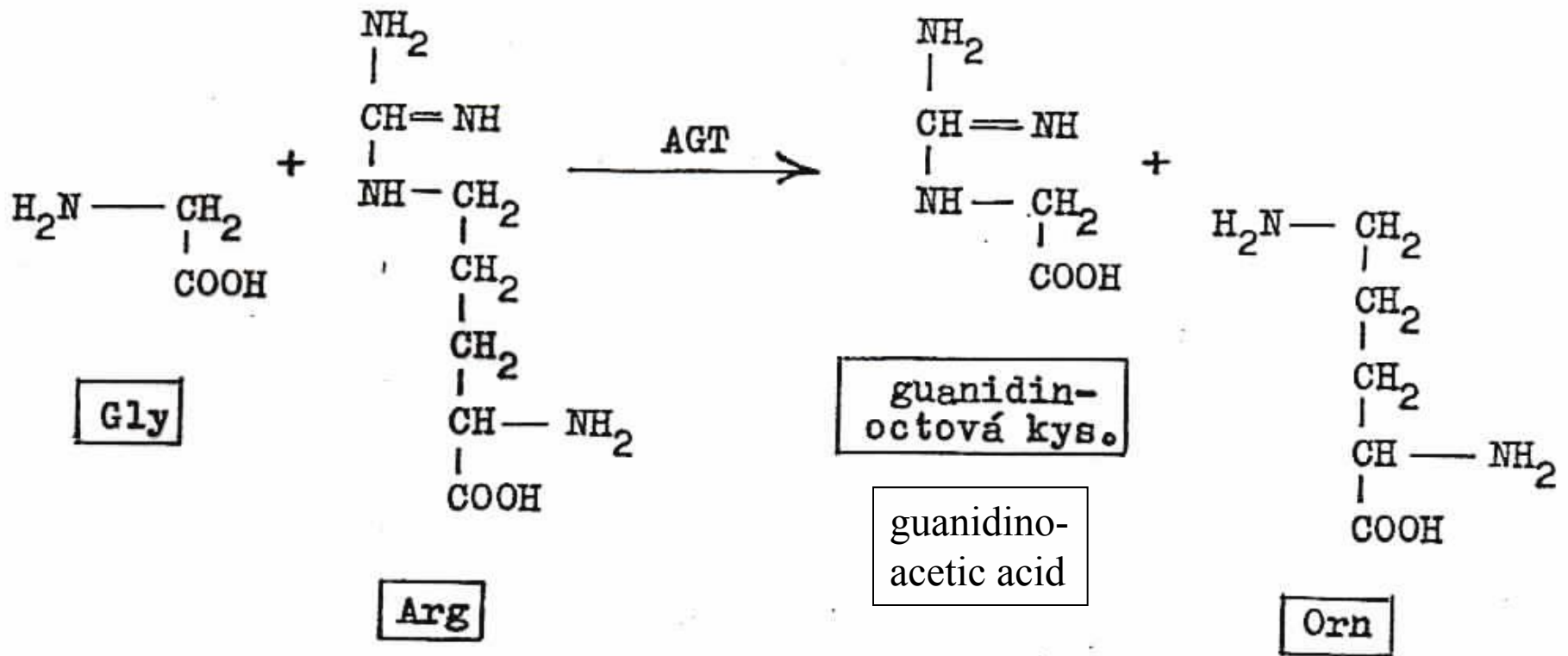


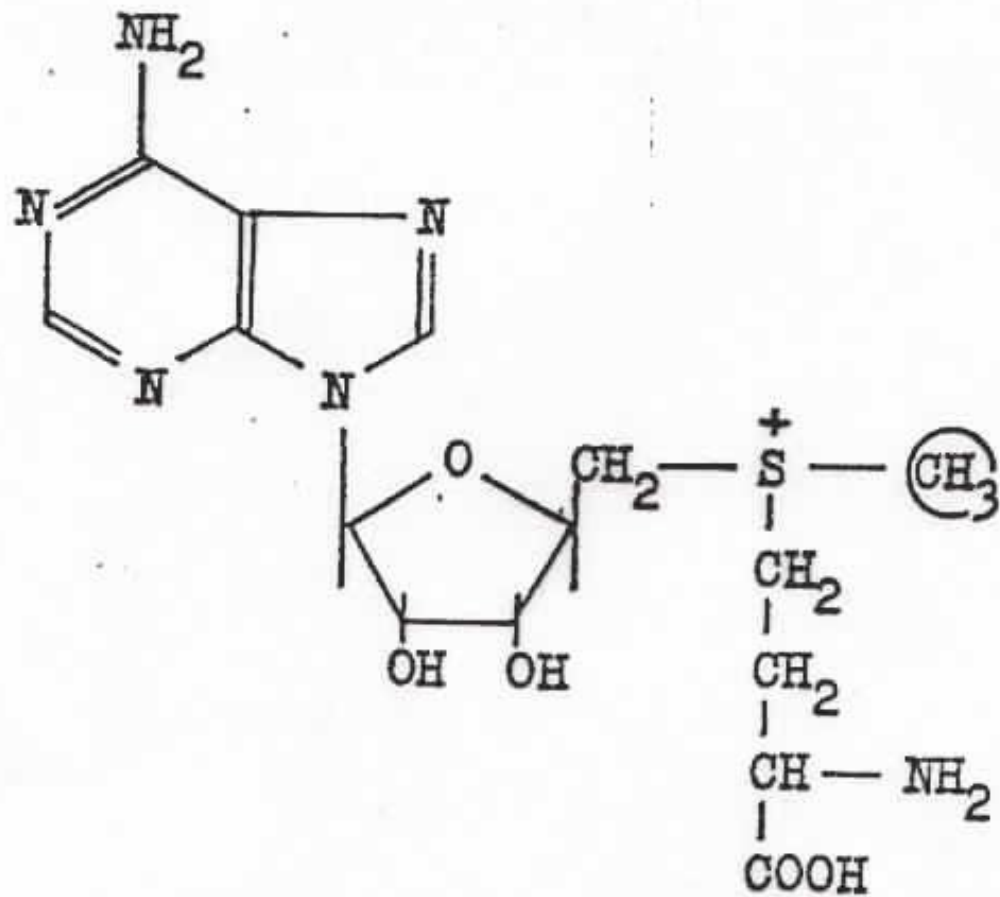
[Phenol.sulfo.phtalein (= FSF, PSP, „phenol red“) is a tri.phenyl.methane dye – an acid-base indicator.

The undissociated form is drawn, the form is present in strong acidic environment.]

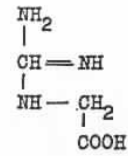
Biosyntéza kreatinu

Biosynthesis of creatine

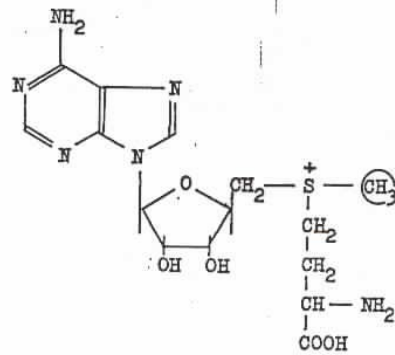




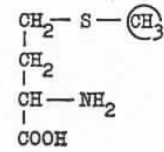
S-adenosyl-Met



guanidin-
octová kys.



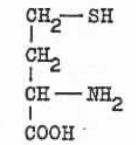
S-adenosyl-Met



Met

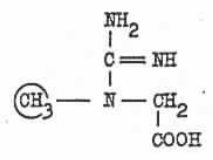
(jako S-adenosyl-)

GAAM

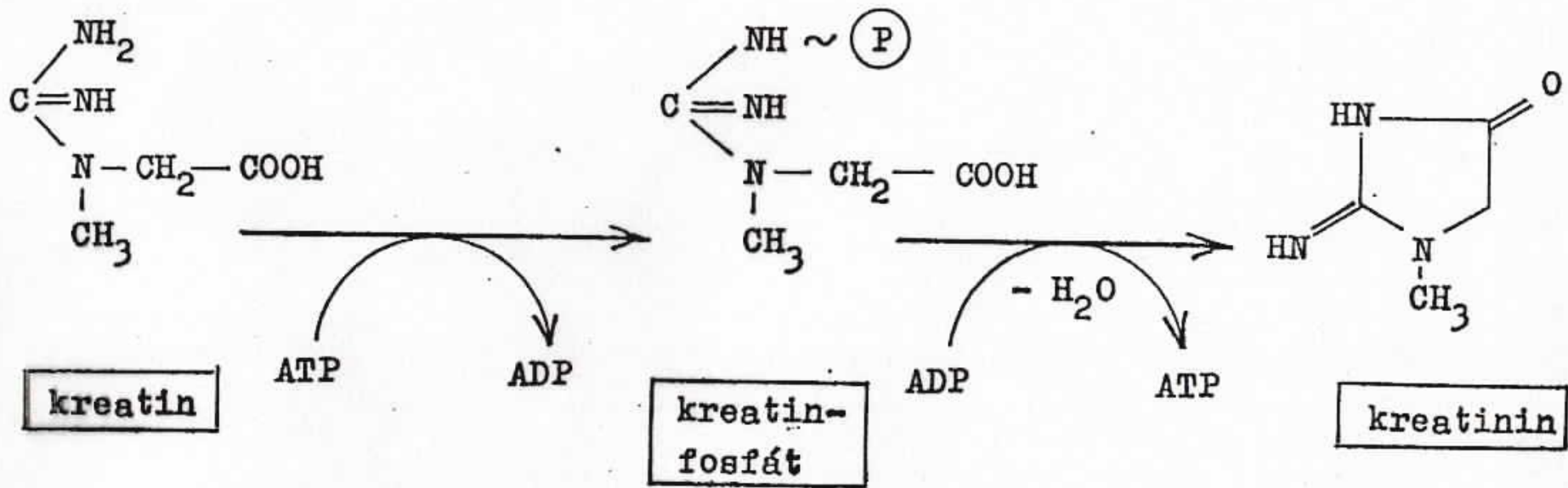


homocystein

(jako S-adenosyl-)



kreatin





kreatininová clearance

.....
 kreatinin v séru:
 (do 115) $\mu\text{mol/l}$

kreatinin v moči:
 mmol/l

diuréza: ml/d
 (v)..... ml/s

odpad kreatininu:.....
 (9 - 16) mmol/d

filtrace (1,33-2) ml/s

- nekorigovaná:

- korigovaná:
 (1,73 m^2)

resorbce:
 (0,988 - 0,997)

(větší podíl
 svalové
 hmoty
 u muže)

(the greater
 part of
 muscle
 substance
 in man)

Cystatin C, clearance (1) :

The creatinine clearance is replaced with the clearance of cystatine C. It is low-molecular protein, which has the function of inhibitor of cysteine proteinases in extracellular fluids (hence its name: Cys + statin).

Cystatin C is regularly released into blood circulation from the all nuclear cells. Its concentration in blood is constant (independent e.g. on inflammatory states).

[Cystatin C demonstrates greater intraindividual variability, however the lower interindividual variability in comparison with creatinine. It allows earlier reveal of kidney damage.]

In the kidneys it is excreted only by glomerular filtration (the creatinine from small part by secretion in proximal tubule too !)
Immunochemical determination.

Cystatin C, clearance (2) :

The corrected clearance (= „relative glomerular filtration“) is now in adults („the convention 2005“) uniformly calculated from the relation:

$$\text{GF (ml / s / 1,73 m}^2\text{)} = [84,69 * \text{cystatin C (mg/l)}^{-1,680}] / 60$$

In patients up to 14 years of age is the result multiplied by so called „prepubertal factor“ 1,384

The programmes*) are at your disposal for backward recalculation of this corrected clearance (= „relative glomerular filtration“) to the uncorrected clearance (= „absolute glomerular filtration“) according to the weight and height of the given patient.

The reading is necessary to determine right dosage of drugs, which are excreted mainly by kidneys.

*) <http://www.klinkem.lu.se/GFRcz.htm>

The properties of substance for measurement of GF:

- **free filtration** (= the substance is not bonded on plasma proteins, free-passing through the glomerular filter)
- **it has neither T_R nor T_S**
- **no metabolism**
- **no deposit in the kidneys**
- **no toxicity**
- **without influence on the GF**
- **determination of the substance in plasma and urine is accessible**

