

**TITLE:** ANALYSIS OF GLOMERULAR FILTRATION RATE IN HUMAN IMMUNODEFICIENCY VIRUS PATIENTS

**AUTHORS:** COSTA, E. S.; SOUSA, G. C.; MOURA, M. E. S.

**INSTITUTIONS:** STATE UNIVERSITY OF MARANHÃO, CAXIAS, MA (RUA QUININHA PIRES, 746, CENTRO, CEP 65600-000, CAXIAS-MA, BRAZIL).

**SUMMARY:**

Antiretroviral therapy has been linked to toxic effects on renal cells and prolonged use of some drugs in HIV infected patients may lead to the development of renal dysfunction by various mechanisms such as nephrolithiasis, intratubular drug deposition, crystaluria, haematuria, Renal atrophy, acute interstitial nephritis and acute and chronic renal failure. It is a documentary, analytical and cross-sectional study carried out in a specialized service, located in the interior of Maranhão, Brazil, from March 2015 to May 2016. A sample of 150 participants . High viral load and low CD4 + T lymphocyte count are parameters that are related to altered glomerular filtration, 77.3% (116/150) had undetected viral load values, ie, low viral load per milliliter of blood , 13.3% (20/150) with values between 40 and 9,999 copies / ml and the others, values above this. The classification of the estimated glomerular filtration rate was stratified, so that of the participants who presented a result lower than 90ml / min / 1.73 m<sup>2</sup> (11.3%; 17), 8.0% were classified in grade 2 and 3 , 3% in grade 3. There was no glomerular filtration rate less than 30ml / min / 1.73m<sup>2</sup> among the participants. The presence of intermediate risk factors for chronic kidney disease such as hypertension and diabetes mellitus should be continuously monitored, as well as modifiable, smoking and overweight should be corrected for preservation of renal function in people infected with HIV / AIDS, because although these factors have not reached statistical significance in the studied population, HIV infection and the continuous use of some antiretrovirals have been related to an increase in the case of renal dysfunction in this population. However, the estimation of the glomerular filtration rate in people infected with HIV / AIDS using the CKD-EPI formula has been shown to be a measure of early detection of altered renal function, being routinely applied in clinical practice in to Of patients taking antiretroviral therapy.

**Keywords:** High activity antiretroviral therapy, HIV infections, AIDS-associated nephropathy.

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