What is Alport Syndrome?

Alport Syndrome is the second most common inherited cause of kidney failure.

It occurs when a special type of collagen (Type IV collagen) normally found in all tissues but especially in the kidney, inner ear and eyes, is missing or abnormal.

One of the early signs of Alport Syndrome may be small amounts of blood or protein in the urine during childhood. This occurs from membranes in the kidneys filtering units or glomeruli.

Blood loss is usually microscopic and so not visible, but may be greater if the child is unwell, for example if they have a viral illness. Then the urine may become pink, or smoky red, although this settles as the child recovers.

Taken from BBC website

Alport Syndrome

Blood Test Results: Understanding your numbers

Created by those living with Alport Syndrome and supported by:

[Logo]

and the Rare Diseases UK working group for Alport Syndrome

For further copies, email info@alportuk.org
## Key renal function numbers

<table>
<thead>
<tr>
<th>Key Renal Function Number</th>
<th>Less than 60</th>
<th>60 – 120</th>
<th>120 – 200</th>
<th>300+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creatinine (Creat)</td>
<td>Suggests a very small person, or someone with little muscle (including small children)</td>
<td>‘Normal’ but there could still be reduced kidney function. This should be used in combination with estimated GFR.</td>
<td>Mild to moderate kidney failure – but in someone with little muscle, 200 could sometimes mean more severe kidney failure.</td>
<td>Moderate to severe kidney failure. Most dialysis patients have Creatinine measurements over 300 all of the time.</td>
</tr>
<tr>
<td>Estimated GFR (eGFR)</td>
<td>Over 90</td>
<td>Normal.</td>
<td>Often used in combination with other tests showing kidney disease</td>
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</tr>
</tbody>
</table>