

# RECOMMENDATIONS FROM THE KDIGO 2024 GUIDELINES\*



Unaffected by muscle mass, cystatin C provides accurate kidney function assessment, including in patients with amputations



Cystatin C may be elevated in smokers – use eGFR<sub>CR</sub>



Cystatin C more accurately estimates kidney function in patients with altered muscle mass, improving drug dosing precision and reducing the risk of toxicity or under-treatment

	eGFR <sub>CYS</sub>	eGFR <sub>CR-CYS</sub>	eGFR <sub>CR</sub>	mGFR
<b>Body habitus/ Muscle mass:</b>				
Eating disorders	X			
Extreme sport exercise	X			
Body builder	X			
Above-knee amputation	X	X**		
Spinal cord injury with paraplegia or similar	X	X**		
Class III obesity		X		
<b>Lifestyle*</b>				
Smoking			X	
<b>Diet</b>				
High protein diets	X			
<b>Illness*</b>				
Malnutrition				X
Cancer		X		X
Heart failure	X	X		
Cirrhosis	X	X		
Catabolic consuming diseases		X	X	
Muscle wasting diseases		X		
<b>Medication effects*</b>				
Steroids		X		
Decreases in tubular secretion	X			X
Broad spectrum antibiotics	X			X



In obesity, non-GFR factors may influence filtration markers; eGFR<sub>CR-cys</sub> is preferred for improved accuracy



Diets that affect eGFR<sub>CR</sub>

- Low-protein
- Keto diets
- Vegetarian
- High-protein diets and creatinine supplements



Illness other than CKD use mGFR for treatment decision and monitoring use



\* Not valid if there are other comorbidities present

\*\* If comorbidities present