


Evaluation of the applicability of SDMA for early diagnosis of CKD in felines and survey of staging and tests used in routine practice

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ABSTRACT

Felines, due to anatomical, physiological and dietary aspects, have a certain predisposition to problems affecting the renal system, highlighting chronic kidney disease (CKD). This disease is a progressive and irreversible disease, being an important cause of death in felines, especially with advanced age. Unfortunately, due to its initial signs being silent, it ends up resulting in late diagnoses, resulting in the appearance of clinical manifestations only during the worsening of the condition. Thus, the symmetric dimethylarginine biomarker (SDMA) has been raised as an alternative for assessing the existence of CKD early when compared to the quantification of serum creatinine, and in 2015 it was incorporated as a method for staging according to the International Society of Renal Interest (IRIS), representing a complementary test and aid in the classification of the stages of this disease, especially in the substages. Thus, the reason for this research was to disseminate a questionnaire to verify the applicability of this biomarker in the routine of veterinarians, in addition to addressing other important issues within this theme.

Keywords: Biomarker, Precocity, Felines, Renal system.

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INTRODUCTION

Currently, the assessment of quality of life has become increasingly relevant in the treatment of chronic diseases, due to the significant negative impact that these conditions have on patients. In felines, Chronic Kidney Disease (CKD) is particularly prevalent due to its evolutionary characteristics, such as eating, physiological, and anatomical habits. CKD is a common nephropathy of great importance, being the main cause of death in this species. Recent studies estimate that the prevalence of CKD in cats ranges from 1 to 3%, and 30% of diagnosed cases occur in felines over 15 years of age (RELFORD, 2016; LOURENÇO, 2019).

Chronic Kidney Disease is defined by the progressive and irreversible loss of nephrons, resulting in impairment of at least 75% of renal function. This negatively affects the excretory and concentrator functions of the kidneys, and is directly related to glomerular filtration rate (GFR) and renal functional mass (MCGAVIN, 2013; ZACHARY, 2013; CRIVELLENTI, 2015).

In the long term, CKD can lead to the emergence of toxic neurological changes due to the accumulation of waste products from cellular metabolism. Even with preventive measures, factors such as age and heredity can contribute to the manifestation of the disease. However, with adequate and timely treatment, it is possible for the animal to have a healthy life, despite some limitations (TOZZETTI, 2009).

Research into more sensitive renal biomarkers has been an important area of focus, as these markers can enable early diagnosis, allow the choice of appropriate therapies, and improve patients' quality of life (OLIVEIRA, 2020). According to Lourenço (2019), traditional methods for assessing kidney function, such as measuring serum urea and creatinine levels, are less used today, which makes room for the use of alternative biomarkers.

In this sense, the biomarker Symmetric Dimethylarginine (SDMA) has shown significant results for the early detection of CKD, being able to identify the disease even when less than 50% of kidney function is compromised (OLIVEIRA, 2020). This is because SDMA is a stable molecule and is widely excreted by the kidneys, making it a good biomarker due to its size and load that facilitate its excretion by glomerular filtration. In addition, the measurement of SDMA is very accurate, being used for early diagnosis of CKD and allowing the implementation of renoprotective interventions that can slow the progression of the disease or stabilize it.

The objective of this study is to investigate the application of the SDMA biomarker in veterinary practice, in addition to exploring other aspects related to CKD, such as diagnostic tests and staging, among other pertinent issues.



METHODOLOGY

A descriptive field research with a quantitative approach was carried out in order to evaluate and discuss the use of the renal biomarker: SDMA, to verify the knowledge of veterinarians regarding this theme, in addition to its use, allowing the verification of its applicability in the veterinary clinical routine of felines. To achieve the objective of the proposed work, a virtual multiple-choice questionnaire was structured, made through the Google Forms platform. The questionnaire in question was composed of 08 questions, where the variables analyzed included: Definition of Chronic Kidney Disease, staging, tests used in the routine for diagnosis, the advantages and disadvantages of the use of SDMA, the use by the participants of it in the clinical routine, and finally the relationship between SDMA and Serum Creatinine. In the questionnaire, it was mandatory to confirm the reading of the Informed Consent Form (ICF), in order to ensure that all the information collected was in accordance with the consent of the interviewees, ensuring the ethical commitment to use the data in accordance with the ethical precepts of the country, according to Resolution 466/12, safeguarding confidentiality and reliability. To identify the participants, their full name and CRMV were requested, thus ensuring that the participants would in fact be veterinarians, avoiding risks of damage to the results achieved. And as the last item for the identification of the participants, the area of activity was requested, in order to better interpret the results. For greater distribution of the questionnaire, the means for dissemination and sharing were: Instagram, Facebook, and Whatsapp. The data were collected from October 5 to October 25, 2023.

RESULTS AND DISCUSSION

The first question presented to the participants was related to the definition of Chronic Kidney Disease, which was found by 41.4% that it is a progressive and irreversible loss, 20.7% indicated that it leads to a decrease in functioning, characterized by an irreversible loss of renal function, already installed for at least three months. In addition, 10.3% indicated that it is characterized by progressive and reversible loss of renal function, and early diagnosis is an important form of treatment to recover the injured mass.

Thus, CKD is defined when functional, progressive and irreversible kidney damage has occurred for at least three months, which will consequently result in an average impairment of 50% of GFR, and it is possible to observe clinical symptoms due to compromised functionality (SILVA, 2018; GUSSO, 2021).

Thus, analyzing the results obtained, we observed that there was a great division and doubt among the participants as to the correct definition and consequence of this disease, thus emphasizing the importance of knowing its progressive, chronic and established character for at least three months, with only 27.6% of the interviewees who indicated the option of characterization by the



progressive and irreversible loss of renal function, already installed for at least three months. This is the most complete option, referring to the definition of CKD.

Thus, not having a curative treatment, but a palliative treatment due to irreversible damage to functional cells, the main therapeutic objective is to normalize water balance, resolve hemodynamic inadequacies and promote urine formation (PALUMBO, 2011). That is why early diagnosis is such an important measure, aiming to prevent the numerous damages that this pathology entails.

Thus, early diagnosis is essential for treatment to be carried out as soon as possible, slowing the progression of the disease, minimizing its complications, and improving the patient's quality of life. Likewise, the collaboration of the tutor and the commitment of the Veterinarian are fundamental for the success of the therapy. (SILVA, 2018)

Next, the participants were asked about the performance of Renal Disease staging, and 27.6% indicated yes, against 24.1% who reported performing the times and finally, 20.7% did not use it because they belonged to another area of activity.

Veterinary medicine develops and improves over time, it has a vast area of activity, but it is erroneously summarized as the clinic and surgery of small and large animals (SOUZA, 2022). That is why it is understandable that many professionals who work in other areas of activity are unaware of the topic addressed, precisely due to the extensive breadth of knowledge within this profession.

Regarding the CKD staging system in cats, according to the International Renal Interest Society (IRIS), it is formed by four stages, according to the fasting serum creatinine or SDMA value, presence or absence of proteinuria, and systolic blood pressure according to the degree of risk of target organ damage and whether there is evidence of target organ damage or complications. In association, urine density can also be assessed (IRIS, 2019; FACHINI, 2023; IRIS, 2023).

Staging is initially based on fasting blood creatinine or fasting blood SDMA, assessed on at least two occasions in the stable patient. It is important to note that the patient must be hydrated and stable (IRIS, 2023).

Care should be taken when interpreting the SDMA value in young animals with concentrations higher than the reference value, as well as the presence of existing comorbidities and prerenal factors (SARGEENT *et al.*, 2021).

This evaluation should be done in conjunction with anamnesis, general clinical analysis and diagnostic evaluations, such as X-rays, abdominal ultrasound, laboratory tests such as: blood count, serum biochemistry and urinalysis, in order to rule out other diseases that may be involved (GUSSO, 2021; FACHINI, 2023; MARCUZ, 2022; IRIS, 2023).

Thus, related to the diagnosis, complementary tests such as X-rays, abdominal ultrasound, blood count, serum biochemistry, and urinalysis are carried out based on the anamnesis (MARCUZ, 2022). Thus, as a result of the third question, related to the tests requested in the routine for diagnosis,



it was observed that the main tests used were: Urea and Creatinine (72.4%), Urinalysis (72.4%), Physical exams and anamnesis (65.5%) and Ultrasonography (62.1%). Thus, SDMA demonstrated, importantly, a low use in the routine by the participants, reaching a value of 37.9%. Representing practically half of its use, when compared to the other tests.

In complementary tests, tests should be used to assess renal concentration capacity, glomerular permeability, and especially glomerular filtration rate (GFR), which is routinely evaluated indirectly through the quantification of markers that must be eliminated from the body through the urinary tract. With the use of such tests, the patient's degree of renal impairment and the staging of the lesions are determined (SILVA; MARCUSSO, 2017).

An important evaluation performed in the small animal clinic is Urinalysis, a simple, non-invasive, inexpensive laboratory test method capable of providing important information related to the urinary tract (GOLDSTEIN, 2005). According to Garcia (2011), urinalysis is a key of great diagnostic importance, as it evaluates the ability of the kidneys to concentrate, whether there is an acute, chronic, inflammatory, infectious, neoplastic process, among others.

Urinalysis is composed of a macroscopic and physicochemical analysis of the urine, in addition to sedimentoscopy (FETTMAN; REBAR, 2006). Through the evaluation of urine density (UD) it is possible to verify the capacity of urinary concentration, reflecting the capacity of dilution and concentration by the kidneys, which in case of CKD will be altered, an isosthenuria can be observed, with a value between 1,008 and 1,012 (POLZIN *et al.*, 2000; WATSON; LEFEBVRE; ELLIOTT, 2015).

The fourth question was about the participants' knowledge of SDMA and their experience with it. Thus, 13.8% were found to have no satisfactory experience with it, associated with 17.2% who had no experience with its use. 41.4% had a satisfactory experience, while only 10.3% reported that they had an excellent experience.

Then, in the fifth question, the participants' knowledge regarding the advantages of this biomarker was verified, and the following were found: early diagnosis of CKD (54.6%), greater accuracy of GFR compared to creatinine (51.7%) and is not influenced by loss of lean mass, animal condition and age (41.4%). It was observed that no participant checked the option of its use to verify other diseases, besides AKI and CKD, and it was possible to verify the lack of knowledge regarding the broad applications that this biomarker can assume, since it can be used to verify other diseases.

There are many pathologies that can lead to secondary kidney failure. Thinking about this line of reasoning, the use of SDMA would be an interesting alternative for renal monitoring due to these diseases. Thus, in cats, the literature talks about the use of SDMA in cases of Polycystic Kidney Disease, lymphoma with renal infiltration, urinary tract infection (UTI) (DITTRICH, 2023; MEDEIROS, 2023). Since this biomarker can be used as a tool to assist in monitoring the renal



system, thus preventing damage and allowing preventive measures to be taken against the damage and disorders that occur as a result.

A high concentration of SDMA reflects a poor Glomerular Filtration Rate (GFR). Both primary kidney disease and secondary kidney damage, such as concomitant diseases, can lead to elevated SDMA concentrations. (IDEXX, 2017)

Thus, thinking about this same line of reasoning, we can highlight its use in cases of inflammatory diseases, since they predispose to kidney damage, and we can highlight the use of SDMA in cases of leptospirosis, pyometra, septic shock, amyloidosis, renal lymphoma, renal infarction, congestive heart failure, hypoadrenocorticism, bladder rupture, ureteric trauma, renal trauma, anesthesia, surgical trauma, non-steroidal anti-inflammatory drugs, among others, which can cause an irreversible loss of functional nephrons, thus compromising renal function (BICHARD, 2003).

Among the causes of infectious diseases that can affect the urinary system, due to glomerular lesions, the following can be highlighted: due to bacteria (post-streptococcal glomerulonephritis, infective endocarditis, shunt nephritis (*Staphylococcus epidermidis*), rickettsia, chlamydia, mycoplasma). Virus-related: Immunodeficiency syndrome (FIV), Infectious hepatitis, Epstein Barr (Infectious mononucleosis), Feline Herpes virus. Referring to Protozoa, one can think of Malaria and Toxoplasmosis. And finally, about Helminths: Schistosomiasis, Visceral Leishmaniasis, Filariasis, Trichinosis, Strongyloidiasis, Opistorchiasis, Trypanosomiasis (VILELA, 2022).

In addition, interstitial nephritis can be caused due to infections, bacterial and viral septicemias. In cats, we can highlight: Feline cholangiohepatitis, Feline leukemia (FELV), FIV, Feline infectious peritonitis, Systemic arterial hypertension, Hypokalemia (low levels of serum potassium) (VILELA, 2022).

In dogs, the literature already reports on the use of SDMA for the evaluation and monitoring of renal functionality in dogs affected by Leishmaniasis, Ehrlichiosis and Leptospirosis (GULTEKIN, 2023; VIEIRA, 2022). Leptospirosis is a classic example of Interstitial Nephritis, especially in dogs. Therefore, the use of SDMA is interesting, especially in endemic areas. (VILELA, 2022)

In addition to the advantageous precocity of elevation compared to serum creatinine, the literature reports on the use of SDMA not only for the evaluation of chronic kidney injuries, but also for the detection of other alterations, such as acute injuries and in patients with kidney stones, although it does not allow the distinction between diseases (HALL *et al.*, 2014a; DAHLEM *et al.*, 2017; HALL *et al.*, 2017). In addition, according to Nabity *et al.* (2015), this marker also has the ability to monitor the progression of the injury, and can be used for this purpose.



Another important point that is raised as an advantage of SDMA would be the non-influence of extrarenal factors on serum concentrations, since it has been established that creatinine is affected by more non-renal factors than SDMA, such as lean body mass, age, and diet.

SDMA more accurately reflects GFR, especially in geriatric cats. This is due to the lack of influence of SDMA in relation to lean body mass, unlike what happens with creatinine, which is decreased in older animals with weight and muscle mass loss (HALL *et al.*, 2014a).

Another importance about the specificity of SDMA is that lean body mass does not affect it, being even more reliable and can be used in animals with great weight and muscle mass loss, such as in animals with hyperthyroidism (HALL *et al.*, 2015).

However, as discussed by Sargent *et al.*, (2021) SDMA and creatinine can also be affected by racial and biological variability and prerenal causes of GFR reduction, such as dehydration. Associated with this information, in the field of human medicine, SDMA has been found to be affected by several disease states, including diabetes, sepsis, and thyroid disease, in the absence of impaired kidney function (Sargent *et al.*, 2021; and Mack *et al.*, 2021).

Although veterinary research is limited, in a study involving 37 cats by Langhorn *et al.* (2018) found that SDMA is significantly lower in cats that had diabetes mellitus compared to healthy controls. Thus, partially in disagreement with the literature, thus demonstrating its susceptibility to influences.

Subsequently, to verify its applicability in the clinical routine by veterinarians, an important value was found, 20.7% who did not use it, that is, who had a routine of CKD, but who really did not use it, and 10.3% who did not use it in the routine, that is, who ended up not facing cases of CKD in the routine, so they did not use it. It was found that 13.8% said they used it in most cases, 20.7% used it sometimes. Thus, it is possible to observe the low or non-applicability of this biomarker in the clinical routine.

Subsequently, which can be raised as possible justifications for its low use in clinical routine, the main disadvantages of the use of SDMA considered by the participants were questioned, with the highest cost (51.7%) being pointed out by more than half of the participants. In sequence, we observed the arrival of animals in an advanced stage in the routine, making early diagnosis impossible (44.8%) and difficulty in authorization by (41.4%).

One of the great difficulties faced in the medical clinic of small animals, as observed in the results found in this research, is the lack of authorization by tutors to carry out the necessary exams, as reported by the authors Alcantara (2019), Marques (2020) and Borges (2022). Due to the growth in cost, many tutors have restrictions on carrying out exams, and since this information provided is often essential by the clinician for screening, directing and even helping to diagnose certain damages,



it forces the veterinarian responsible for opting for palliative treatments, and even assuming presumptive diagnoses.

Subsequently, less pointed out by the participants, it was found: need to associate them with other tests, which will add value (34.5%), difficulty in understanding by tutors or veterinarians about their use and need (20.7%), lack of knowledge (13.8%) and difficulty in interpreting their results (3.4%).

In the clinical routine, it is often necessary for the tutor to understand the need for the exam to be performed, so that the authorization to be performed can occur. Thus, as found in this research, 20.7% have doubts about its use and interpretation, and with this, the veterinarians themselves may end up not requesting the exam due to doubts in its interpretation, or even not being able to resolve the doubts of the tutors about its operation, thus not being able to justify the need for its performance.

In agreement with the results obtained, Oravev (2021) in his work also reported on the tutor's non-authorization to perform the SDMA exam, being affirmed by IRIS (2019), the concentrations of SDMA important for confirmation or correction to a more advanced stage. Thus, Jericho *et al.* (2015) emphasizes that the success of the treatment and reduction of the progression of kidney injury depends on the collaboration of the owner.

Oravev (2021), also in his study, demonstrated the importance of performing laboratory and imaging tests, emphasizing the importance of early diagnosis, because the sooner the clinician's intervention occurs, the better the patient's prognosis. After the staging of the animal, the correct treatment for the stage is initiated, thus seeking to delay the progression of the disease, minimize complications and improve the patient's quality of life.

We commonly observe in the clinical routine the low demand by tutors for check up appointments, aiming to monitor the health of their *pet* and consequently preventing the emergence of possible diseases. According to what was observed by D'Almeida (2023), in which the casuistry followed in his work, of 48 consultations in felines, only (18.75%) was related to prophylaxis, divided between vaccination, FIV/FELV testing, and within this value, only 3 consultations (6.25%) were check up. Thus, even knowing the numerous benefits of keeping *pet appointments* up to date, many tutors reject this practice.

For this reason, the diagnosis usually occurs only in the most advanced stages of Chronic Kidney Disease, which, due to the great loss of kidney function, results in the appearance of clinical signs (MARCUSZ, 2022). It is at this time that owners tend to seek veterinary support, again justifying the low use of SDMA due to its unfeasibility, since it would no longer be possible to carry out an early diagnosis.

Finally, as the last question, it was verified about the participants' knowledge regarding the relationship between the increase between SDMA and serum creatinine, and it was found that 41.4%



of the participants checked the correct option, which reports the increase in SDMA with 25% of injury, and Creatinine with 75%, and only 13.8% selected the wrong option, which stated that SDMA increases with 30% of kidney injury. The other most important portion, 27.6%, reported not having knowledge, associated with 10.3% not having knowledge or being in doubt because they belonged to another area of activity.

With this in mind, currently the laboratory diagnosis of Kidney Injury is extensively performed by means of serum biochemistry of creatinine, however, it does not have the ability to detect mild degrees of loss of renal function, due to its low sensitivity, making it unfeasible to measure it as an early diagnosis method, being feasible in patients with a reduction of 75% in GFR or more, indicating moderate to severe renal involvement. It classifies it as a late marker due to neglect of the early stages of injury (POLETTTO, 2016; PAIVA, 2018).

In addition, creatinine is interfered with by several factors that are independent of the kidneys, such as eating time, muscle mass index, and age, which compromises its role as a marker of this organ (PAIVA, 2018).

Serum creatinine concentration is not able to detect mild degrees of loss of renal function, due to its low sensitivity, making it unfeasible to measure it as an early diagnosis method, being feasible in patients with a reduction of 75% in GFR, indicating moderate to severe renal impairment (POLETTTO, 2016).

One of the aspects most highlighted as an advantage of SDMA compared to creatinine, one of the most important markers of renal function requested in the clinic, is the early detection of elevation in the face of the injury faced, according to Hall *et al.*, (2016b) the increase in SDMA possible in cases where there is a 25% loss of kidney function, making SDMA more reliable in cases of CKD, compared to creatinine, which only rises when there is a loss of approximately 75% of kidney function

In addition, Íris (2017) stated that the results of the SDMA test are more reliable for renal evaluation, and should therefore be evaluated before serum creatinine, however to classify Chronic Kidney Disease and analyze kidney function, the creatinine concentration rate is complementary to SDMA

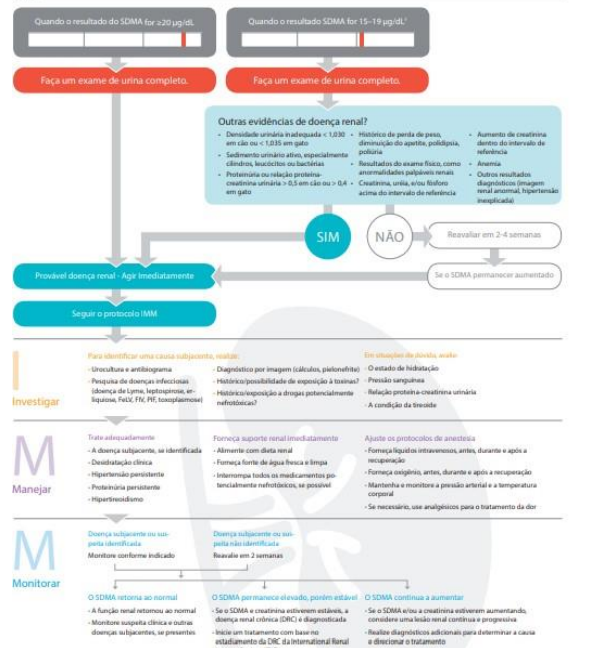
When SDMA concentrations are increased, decreased renal function may be presumed as a result of AKI or CKD, or even both. Thus, it is essential to carry out a more in-depth research to elucidate the clinical condition in which the animal is, and to take the necessary measures (**Fig. 4**) (IDEXX, 2017).

Fig.4

O Algoritmo do Teste IDEXX SDMA®

O SDMA pode aumentar tanto na presença de lesão renal ativa ou aguda, assim como na doença renal crônica.

Tomar atitude quando os resultados de SDMA® estiverem aumentados. Siga este algoritmo para determinar se há probabilidade de doença renal e quais passos você deve seguir para investigar, manejar e monitorar a doença.



Source; IDEXX (2017)

CONCLUSION

Through the work presented and the information collected, it is possible to affirm that, according to data in the literature, SDMA initially represented an interesting alternative for the early diagnosis of Chronic Kidney Disease, and can also be used to monitor the renal system due to the involvement of primary diseases that can affect this system. However, after some research, the need for further studies on its application was demonstrated. In addition, through the research carried out in this work, it was possible to verify the low applicability of it in the routine of the participating veterinarians, and the main justifications can be raised: the high cost, animals presenting themselves in an advanced stage of CKD, making early diagnosis impossible, and finally, restriction of authorization by the owners to perform the exam. It is worth mentioning that this research was a pioneering work, where it aimed to evaluate the applicability of SDMA in the routine of veterinarians, and future investigations and research are necessary for a greater understanding of the opinion, acceptance and application of it in the veterinary clinical routine.



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