



Additional Fracture Prevention Management of patients with established Chronic Kidney Disease stage 3-5 : 2012 final (review 07/13)

KDIGO Stages of kidney disease (measure using Cockcroft & Gault if possible)

Stage	eGFR
1	> 90
2	60- 90
3	30-60
4	15-30
5	< 15

CKD 1-3:
+
no renal disease
+
Normal Ca/Phos/
ALP/PTH

CKD 3/4:
+
Abnormal Ca/Phos
ALP or PTH

CKD 5 or dialysis

Close joint specialist renal/ bone care

Treat as per main secondary prevention pathway

Optimize calcium and phosphate as feasible

Optimize 25OHD replacement to ≥ 50 nmol/L unless contra-indicated (watch for high phosphate)

Target PTH between x2-4 normal range

Target PTH between x2-9 normal range

If high re-fracture risk

Measure bone specific ALP
IF ALP not elevated above normal range then consider bone biopsy* to exclude adynamic bone disease

Consider risedronate 35mg ow or denosumab 60mg 6monthly**

*Double label 250mg tetracycline tds for day 1-3 then repeat at day 10-12 then biopsy at day 21-27

**risk of severe hypocalcaemia aim to normalise 25OHD pre-injection & optimal calcium dietary intake monitor serum calcium 1 week post injection