

CADMIUM INDUCED RENAL TUBULAR DAMAGE AMONG RESIDENTS LIVING NEAR THE COPPER REFINERY PLANT IN KOREA.

Geun-Bae Kim, *National Institute of Environmental Research, Korea*
Chung-Hee Park, *National Institute of Environmental Research, Korea*
Chul-Ho Lee, *National Institute of Environmental Research, Korea*
Seung-Do Yu, *National Institute of Environmental Research, Korea*
Sang-Yong Eom, *College of Medicine, Chungbuk National University, Korea*
Heon Kim, *College of Medicine, Chungbuk National University, Korea*

Background/Aims: Cadmium (Cd) is the most potent nephrotoxic heavy metal, with a long biological half-life in human body. This study aimed to assess the effect of environmental Cd exposure on kidney dysfunction.

Methods: The study subjects composed of 687 individuals who reside within 4 km area from a copper refinery plant. We analyzed the concentrations of Cd in blood and urine, renal tubular damage markers [urinary α_2 -microglobulin (α_2 -MG), N-acetyl- β -D-glucosaminidase (NAG) activity, and total protein], and kidney function markers [blood urea nitrogen (BUN) and serum creatinine]. Renal dysfunction rates were estimated and compared according to the hematologic and urinary Cd level.

Results: The blood Cd ranged from 0.21 to 16.12 $\mu\text{g/L}$ (geometric mean; 2.56 $\mu\text{g/L}$) and the urinary Cd, from 0.14 to 22.42 $\mu\text{g/g creatinine}$ (geometric mean; 2.72 $\mu\text{g/g creatinine}$). The urinary NAG activity was significantly correlated with urinary cadmium level ($r=0.103$, $p=0.021$). As blood or urinary Cd level increased, the prevalence of renal tubular damage (defined as $\text{U-NAG} > 11.5 \text{ U/g creatinine}$, or $\text{U-}\alpha_2\text{-MG} > 300 \mu\text{g/g creatinine}$) increased in a dose-response way. The odds ratio (adjusted for age, gender, smoking status, history of diabetes and hypertension) for abnormality of U-NAG according to U-Cd level showed a linear increase, but for U- α_2 -MG was not. The prevalence of abnormal serum creatinine level (defined as serum creatinine $> 1.3 \text{ mg/dL}$) was significantly increased in subjects with moderately elevated blood cadmium level (B-Cd; 2.0 ~ 5.0 $\mu\text{g/L}$) (odds ratio; 9.60, 95% CI; 1.23-75.17). There were significant differences in the prevalence of renal tubular damage and in that of abnormal serum creatinine level between individuals whose blood Cd level was 2.00 $\mu\text{g/L}$ or higher and those with blood Cd level lower than 2.00 $\mu\text{g/L}$.

Conclusion: These results suggest a possibility that Cd as low as 2.00 $\mu\text{g/L}$ for blood or 2.00 $\mu\text{g/g creatinine}$ for urine can cause renal tubular or glomerular damage.

Keywords : copper refinery plant, cadmium, renal tubular damage