CHAPTER V

CONCLUSION

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Source of oxidative stress in renal disease include an increased production of free radical, especially from glycation and lipid peroxidation process, decreased antioxidant defense systems, and NAG activity is marker widely distributed lysosomal enzyme located in the renal proximal tubules as the results of this study.

The oxidative stress biomarkers, lipid hydroperoxide and malondialdehyde, from lipid peroxidation process in patients with renal disease patients were increased compared with healthy control. This results indicated that patients with renal disease had increased oxidative stress status and total antioxidant capacity in renal disease patients were decreased this may be cause by the counter action for the oxidative stress in renal disease patients. The oxidative stress biomarker (lipid hydroperoxide and malondialdehyde) and total antioxidant capacity were used as biomarkers for prognosticate in the development of atherosclerosis and/or cardiovascular complications in renal disease patients. From these results, increased oxidative stress in CRF patients and there marker can be useful to monitor and optimize antioxidant therapy which may be an important adjunct in the management of patients with CRF. And we propose that a useful early marker of the N-acetyl-β-D-glucosaminidase (NAG activity) of renal injury associated with the decline in eCrCl and GFR.