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Title: Microalbuminuria in chronic obstructive pulmonary disease

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Body: Introduction: We investigated levels of microalbuminuria and the factors determining in patient with COPD Method: 66 patients with COPD and 40 subjects as control group were included. The presence of microalbuminuria (MAB) was defined when the urinary albumin creatinin ratio (UACR) was between 20 mg/g in men and 30 m/g in women. Results: Pearson correlation showed that there were inverse associations between UACR and PO₂, FEV₁%, FVC% and positive relation between UACR and BODE index. In linear regression model, the UARC showed inverse association with PO₂ while positive association with MRCI, and BODE index.

Table 1: The predictors of urinary albumin/kreatinin ratio in all subjects

Urinary albumin/kreatinin ratio	B values	p values	Urinary albumin/kreatinin	B values	p values	Urinary albumin/kreatinin	B values	p values
Age	-0.10	0.4	Age	-0.18	0.17	Age	0.01	0.9
Sex	0.17	0.1	Sex	-0.01	0.9	Sex	0.05	0.06
BMI	-0.02	0.8	BMI	0.22	0.07	BMI	-0.06	0.6
MRCI	0.31	0.007	MRCI	0.04	0.04	MRCI	0.19	0.1
PO ₂	-0.22	0.04	FEV ₁ %	-0.12	0.3	BODE index	0.28	0.01

Statistical significance $p < 0.05$ BMI: Body Mass Index MRCIS: The Modified Cumulative Illness Rating Scale

In logistic regression model, the presence of MAB showed associations with severity of COPD, PO₂, BODE index, PO₂ and age.

Table 2 : The predictors of presence of MAB in all subjects

	Presence of MAB		Presence of MAB		Presence of MAB
	p values		p values		p values
Age	0.003	Age	0.02	Age	0.007
Sex	0.4	Sex	0.3	Sex	0.3
Smoke p/y	0.7	Smoke p/y	0.9	Smoke p/y	0.7
Severity of COPD	0.04	BODE index	0.02	PO ₂	0.003

Statistical significance $p < 0.05$ BMI: Body mass index COPD: Chronic obstructive pulmonary disease

Conclusion: Microalbuminuria may be seen in patients with COPD depending on severity of disease and hypoxemia.