

# Hypophosphatasia and Your Kidneys—What to Expect

If you or a loved one has hypophosphatasia (*HPP*), you already know that it is a rare genetic disease that can affect the development of bones and teeth. In *HPP*, an inherited gene mutation interferes with the ability to produce alkaline phosphatase (*ALP*), an enzyme necessary for proper bone development. People with *HPP* might, for example, have frequent bone fractures, skeletal deformities, short stature, and/or premature loss of baby teeth.

**What is less known is that people with *HPP* can be at a greater-than-typical risk for kidney damage**—both because of the effect of insufficient *ALP* on the kidneys and as a result of high doses of certain pain medications. Although data is scant on the prevalence of kidney involvement, experts agree that it's essential for those with *HPP* to be aware of its signs, practice preventive measures, and get regular medical screenings to catch early indicators.



## Why Does a Bone Disease Affect Kidneys?

*ALP* is required not only for normal bone development, but also for maintaining healthy kidney function. Ordinarily, calcium, phosphorus, and vitamin D are flushed out through the kidneys via a process that involves *ALP*. **Low *ALP* impedes the normal process**, causing these minerals and vitamins to accumulate and setting in motion a chain of physiological events that can result in kidney malfunction.

What's more, if you treat your *HPP*-related bone pain with nonsteroidal anti-inflammatory drugs (*NSAIDs*), as is common, you may inadvertently amplify the assault on your kidneys and hasten kidney damage.

## *HPP*-Associated Kidney Problems

**People with *HPP* can be predisposed to kidney stones.** Because low levels of *ALP* hamper the ability of calcium to exit the kidneys, calcium accumulates and can form into kernels—stones—that get stuck in kidney ducts. Besides being very painful, chronic **kidney stones can lead to progressive kidney damage**—which, leads to **high blood pressure**, which, in turn, further damages the blood vessels of the kidneys. If you have high blood pressure from causes other than *HPP* (*family tendency, obesity, etc.*), it can exert an additive effect on the kidney-related impact of low *ALP*. If not properly and quickly addressed, **progressive kidney damage can lead to chronic kidney disease.**



## What to Watch For

Several symptoms are early warnings of potential kidney involvement. If you experience any of these, contact the doctor managing your HPP. They include:

- **Burning or pain upon urination**
- **Blood in the urine**
- **Kidney pain** (*in the sides or middle to upper back on either side of the spine*)
- **Frequent urination**

Several signs of potential kidney involvement can be found through regular medical screening. They include:

- **High blood pressure**
- **High serum calcium** (*hypercalcemia*)
- **High urine calcium** (*hypercalciuria*)
- **Serum creatinine**
- **High serum vitamin D**
- **Ultrasound of the kidney**
- **High serum phosphorus** (*hyperphosphatemia*)

Based on early-warning signs or symptoms, the physician may refer you to a nephrologist (*kidney specialist*) for further evaluation and monitoring, which may include additional laboratory testing and ultrasound imaging.



## How to Protect Your Kidney Health

- **Good water intake** to flush out high levels of phosphorus and calcium and minimize chance of crystal/stone deposits in the kidney
- **Limit NSAIDs to no more than three times per day**  
chronic use of NSAIDs can lead to kidney damage, increasing the damage from HPP
- **Normal, age-based calcium intake - avoiding high calcium intake** — too much calcium and vitamin D can cause renal complications — as the medical professionals move away from supplementing those with HPP with extra calcium and vitamin D, individuals with HPP should have fewer kidney problems.
- **Normal vitamin D intake**
- **Control your blood pressure**
- **Annual kidney assessment**, which should include blood pressure check, urinalysis, and serum creatinine
- **Regular DEXA imaging and bone-lab monitoring**, which should include parathyroid hormone and vitamin D status



**Learn more about HPP and navigating life with HPP at [SoftBones.org](https://www.softbones.org).  
You can also contact Soft Bones at [info@SoftBones.org](mailto:info@SoftBones.org)**

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