


References


Cardounel AJ, Cui H, Samouilov A, et al., Evidence for the pathophysiological role of endogenous methylarginines in regulation of


**Charra B, Calemard E, Laurent G:** Importance of treatment time and blood pressure control in achieving long-term survival on dialysis. *Nephron*1996; 16:35–44.


**Chen HC, Tsai JC, Tsai JH, Lai YH.** Recombinant human erythropoietin enhances superoxide production by FMLP stimulated polymorphonuclear leukocytes in hemodialysis patients. *Kidney Int* 1997; 52: 1390 _4_.


**Cheung AK, Rocco MV, Yan G, Leypoldt JK, Levin NW, Greene T, Agodoa L, Bailey J, Beck GJ, Clark W, Levey AS, Ornt DB,


D’Amour P, Jobin J, Hamel LL, ’Ecuyer N: iPTH values during
hemodialysis: Role of ionized Ca, dialysis membranes and iPTH assays. 


Depner TA, Nephrology Division, Department of Medicine, University of California, Davis, Davis, California. Seminars in Dialysis—Vol 14, No 4 (July–August) 2001; pp. 246–251.


**References**


References


Grzegorzewska AE and Mlot-Michalska M. Bone pain in dialysis patients is not associated with bone mineral density but with serum concentration of small uremic toxins. Advances in Medical Sciences 2007; 52:228-31.


Honda K, Nitta K, Horita S et al., Accumulation of advanced glycation end-products in the peritoneal vasculature of continuous ambulatory


Iwasaki-Ishizuka Y, Yamato H, Nii-Kono T et al., Skeletal resistance to PTH is induced by indoxyl sulfate, one of the uremic toxins, leading to adynamic bone.


Klampfl CW: Recent advances in the application of capillary electrophoresis with mass spectrometric detection. Electrophoresis 2006; 27: 334.


Llach F: Secondary hyperparathyroidism in renal failure: The trade-


Lysaght M, Bruder J, O’Loughlin J. Development of orally administered microcapsules for removal of uremic toxins. Center for
Biomedical Engineering, Brown University, Providence, RI, United States. Monday June 2009.


Massy ZA. Importance of homocysteine, lipoprotein(a) and non-classical cardiovascular risk factors (fibrinogen and advanced glycation end-products) for atherogenesis in uremic patients. Nephrol Dial Transplant 2000; 15[Suppl5]: 81-91.


References

experimental hypertension. **Hypertension 1997;29:242–247.**


Means RT, Krantz SB: progress in understanding the pathogenesis of the anemia of chronic disease. **blood 1992; 80:1639-1647.**


Musante L, Candiano G, Petretto A, Bruschi M, Dimasi N, Caridi


Niwa T, Katsuzaki T, Momoi T, Miyazaki T, Ogawa H, Miyazaki S, Tatemichi N, Takei Y. “Modification of β2-m with advanced glycation end products as observed in dialysis-related amyloidosis by 3-DG


Perl J, Unruh ML, Chan CT. Sleep disorders in end-stage renal disease: ‘Markers of inadequate dialysis’? Kidney Int 2006;70:1687-93


Port FK, Wolfe RA, Hulbert-Shearon TE, et al., Mortality risk by hemodialyzer reuse practice and dialyzer membrane characteristics:


Tepel M, van der Giet M, Statz M, et al. The antioxidant acetylcysteine reduces cardiovascular events in patients with end-stage


Yavuz A, Tetta C, Ersoy F, Bonello M. Division of Nephrology and Transplantation, Akdeniz University, Antalya, Turkey; Research Extracorporeal Therapies, Fresenius Medical Care Deutschland GmbH, Hamburg, Germany; Department of Nephrology, San Bortolo Hospital, Vicenza, Italy; and Renal Research Institute and Beth Israel Medical Center, New York, New York Seminars in Dialysis—Vol 18, No 3 (May–June) 2005; pp. 203–211.


