Intestinal microbial flora in patients with CKD characterized by decreases in both Lactobacillaceae and Prevotellaceae families have been reported (Mafra et al., 2014). As a result, uremic toxins produce bacteria families’ overgrowth that impacts immune response and inflammatory reactions. The next important questions to be answered in nephrology: how gut microbiome diversity impacted by primary renal disease and how it changes with progression of chronic renal impairment. Pediatric Gut Microbiome. Nephrology (from Greek nephros “kidney”, combined with the suffix -logy, “the study of”) is a specialty of medicine and pediatric medicine that concerns itself with the kidneys: the study of normal kidney function and kidney disease, the preservation of kidney health, and the treatment of kidney disease, from diet and medication to renal replacement therapy (dialysis and kidney transplantation). The amyloidoses constitute a group of diseases in which proteins deposit extracellularly in tissues as insoluble fibrils. Renal disease is a frequent manifestation of the systemic amyloidoses and often is the major source of morbidity for individuals with these disorders. Without treatment, amyloidosis-associated kidney disease usually progresses to end-stage renal disease (ESRD). Substantial progress in understanding the process of amyloid fibril formation and the mechanisms underlying disease manifestations have led to important advances in treatment, some of which have applicability not only