

Chronic Kidney Disease

If you are reading this leaflet, you have probably been told that you or a loved one has been diagnosed with chronic kidney disease (**CKD**). This means that your kidneys do not work as well as they once did. This can make it harder for your body to remove waste products properly. Damage to the kidney's filtering system can lead to blood and protein leaking into your urine.

It is called a “**chronic**” disease because it is a **long-term health condition**, and not because the condition is severe. CKD is a common disease that affects **1 in 10 people** in the UK, affecting all ages, sexes and ethnicities. However, it can run in families and is more common in people of Afro-Caribbean and Asian backgrounds.

How do the kidneys work?

1. Most people have **two** kidneys. They are the size of a fist and are shaped like kidney beans. They sit in the abdomen, towards the back on either side.
2. The kidneys' job is to **filter waste products from the blood** and **produce urine** (wee). The body removes these waste products by urination.
3. Producing urine also allows the kidneys to **control** the levels of **salt and water** in the body
4. The kidneys produce **hormones** which a) stimulate the bone marrow to produce your **red blood cells**, which carry oxygen around the body, and b) control **blood pressure**

What causes CKD?

There are several causes of CKD including:

- Diabetes
- Heart disease
- High blood pressure (hypertension)
- Inflammation in the kidneys (glomerulonephritis)
- Long-term, regular use of NSAID (anti-inflammatory) pain medications including ibuprofen and naproxen
- Family history of rare or inherited kidney disease

Knowing which of these conditions has caused or has contributed to your CKD will help your team to treat your CKD better.

What are the symptoms of CKD?

People with early-stage CKD (1-3) can be **totally asymptomatic** as the kidneys are still functioning well enough to prevent noticeable symptoms.

Late-stage CKD (4-5) can cause a variety of symptoms including:

- Weight loss, nausea and poor appetite
- Swollen ankles, feet, hands and a puffiness around the face
- Shortness of breath
- Tiredness and difficulty sleeping
- Increased frequency passing urine (including overnight)
- Itchy skin
- Headaches
- Blood in your urine

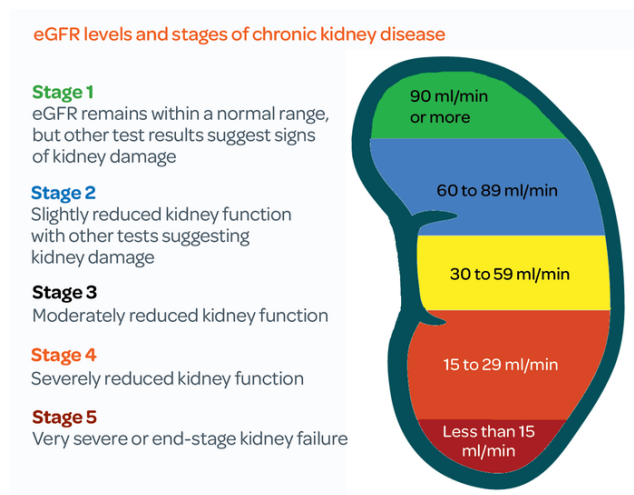
Even though some people do not have symptoms of their CKD, **kidney damage can still impact your health**. CKD increases the risk of developing high blood pressure, heart disease, having a stroke or developing an acute kidney injury. **Early diagnosis** and **regular monitoring** are essential as **lifestyle changes** and medical treatment can prevent CKD from getting worse.

How is CKD diagnosed?

CKD is **diagnosed** and **monitored** by **blood** and **urine** tests.

You may be offered these tests **routinely** at a check-up or because you are at **increased risk** of developing CKD because of your medical history (e.g. having diabetes, high blood pressure, heart disease or a family history of CKD).

CKD is divided into **5** stages based on your **glomerular filtration rate (eGFR)**. This is the rate at which the **kidneys can filter your blood**, based on the volume of blood that passes through the filtering network of blood vessels in the kidney every minute. Most people with **CKD Stage 1-3** can manage their disease **themselves** and with support from the team at their **GP surgery**. If your CKD progresses to stage 4 or 5, you will need to be referred to a kidney doctor (**nephrologist**).



Kidney Care UK

What happens once I've been diagnosed with CKD?

If you have been diagnosed with CKD 2-3, you will be invited to have an **annual** check with a member of the team at the surgery to monitor your CKD and overall health. This will include checking your **weight** and **blood pressure**. We will also ask you for a **urine sample** (to check if protein and blood are leaking into the urine) and a **blood test** to measure your **eGFR** and to check for **anaemia**. We will discuss if you are having any symptoms and create a plan integrating any necessary medical treatments alongside **lifestyle changes**.

If you have been diagnosed with CKD 4-5, you will likely be referred on to a **nephrologist** (kidney doctor) to discuss treatment options in more detail. For some people this can include dialysis or a kidney transplant. For others, this can mean managing symptoms conservatively, focussing on comfort and quality of life. This decision will be made **with you** and you will receive support and advice from your team to help you understand what treatment options are available to you.

How can I keep myself healthy?

- Eat a **balanced** diet
- Take **regular exercise** – try increasing your walking. Any amount is better than none.
- **Stop smoking**
- **Reduce** your **alcohol** intake
- Keep up to date with your **vaccines** – ask about eligibility for COVID-19, flu and pneumonia vaccinations
- Check you **blood pressure** regularly
- Be mindful that some medications (including over the counter) can worsen kidney disease – **make sure that your doctor or pharmacist are aware of your chronic kidney disease** when advising treatment options

Other sources of help:

- NHS CKD - www.nhs.uk/conditions/kidney-disease
- Kidney Care UK - www.kidneycareuk.org/get-support
- Kidney Kitchen - www.kidneykitchen.org

References

https://kcuk.hacdn.org/media/documents/Kidney_Care_UK_Chronic_Kidney_Disease.pdf