

nutritional anemia

Growth disturbance, probably caused by such factors as renal osteodystrophy, poor nutrition associated with dietary restrictions and loss of appetite, and biochemical abnormalities

Children with CKD seem to be more susceptible to infection, especially pneumonia, UTI, and septicemia, although the reason for this is unclear. These children become extraordinarily sensitive to changes in vascular volume that may cause pulmonary overload, CNS symptoms, hypertension, and cardiac failure.

Diagnostic Evaluation

The diagnosis of CKD is usually suspected on the basis of any number of clinical manifestations, a history of prior renal disease, or biochemical findings. The onset is usually gradual, and the initial signs and symptoms are vague and nonspecific ([Box 26-6](#)).

Box 26-6

Clinical Manifestations of Chronic Renal Failure

Early signs:

- Loss of normal energy
- Increased fatigue on exertion
- Pallor, subtle (may not be noticed)
- Elevated blood pressure (sometimes)

As the disease progresses:

- Decreased appetite (especially at breakfast)