National Kidney Foundation®

What You Should Know About Chronic Kidney Disease

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GENERAL INFORMATION ABOUT THE KIDNEYS

The kidneys clean your blood by removing wastes and extra fluid. Those waste products and extra fluid are in urine. They also help control blood pressure and make hormones that your body needs to stay healthy. Chronic kidney disease (CKD) means the kidneys have been damaged by diabetes, high blood pressure or other disorders. CKD doesn't cause symptoms until kidney disease is more advanced. Kidney tests will tell you how your kidneys are working. If you are at risk for CKD (see below), you should find out as early as possible if you have kidney disease to avoid problems and slow the loss of kidney function. It is recommended that you ask your doctor to test you for CKD at least once a year.

RISK FACTORS FOR DEVELOPING CKD

Diabetes: Diabetes is a major cause of kidney disease. Diabetes can be treated and can improve with healthy lifestyle choices.

Pre-Diabetes: If you have pre-diabetes, you have a greater chance of developing diabetes. Diabetes is a major cause of kidney disease and kidney failure.

High Blood Pressure (hypertension): High blood pressure is a leading cause of kidney disease. It can damage the tiny blood vessels in your kidneys. This can lead to kidney disease or kidney failure. Working with your doctor to control your blood pressure, eating a kidney-friendly diet and exercising regularly can help.

Heart Disease or Heart Failure: Your heart and kidneys work together to keep you alive and healthy. When one is affected, the other is too. In other words, your heart can affect the health of your kidneys, and your kidneys can affect the health of your heart.

Family History of CKD, kidney failure or dialysis: People are 2 to 3 times more likely to get CKD or kidney failure if they have family members with CKD, kidney failure, a kidney transplant or who have been on dialysis.

Overweight or Obesity: If you are overweight or obese, you have a greater chance of developing diabetes or high blood pressure, which are major causes of kidney disease and kidney failure.

INFORMATION ABOUT CKD TESTING

CKD is diagnosed using two simple tests. You must do both tests to have a clear picture of your kidney health. A blood test shows how well your kidneys are working to clean your blood. A urine test shows if you have protein in your urine, which may mean you have signs of kidney damage.

Blood Test:
Estimated Glomerular Filtration Rate (eGFR)

This test is the best measure of how well the kidneys are removing wastes and excess fluid from the blood. Normal eGFR can vary according to age (as you get older, it is normal for it to go down). An eGFR below 60 is a sign that the kidneys are not working well. You can think of eGFR as a percent of kidney function with less than 60% being lower than normal. The eGFR goes down if kidney disease gets worse.

Urine Test:
Urine Albumin-Creatinine Ratio (UACR)

The urine albumin test or urine albumin-creatinine ratio (UACR) measures the amount of a protein called albumin in the urine. Albumin is found in high amounts in the blood, but almost no albumin is in the urine when the kidneys work well. However, kidney disease may cause albumin to spill (leak) into the urine, even early in the disease. An UACR more than 30 means that albumin has spilled into your urine because the kidneys are have been damaged.

Questions for your Doctor:

1. Have I been recently tested for CKD with both eGFR and UACR?
2. If yes, what are the results of those tests?
    a. What is my eGFR?
    b. Is my UACR greater than 30?
3. If no, can you please order these tests today so I can understand how healthy my kidneys are?
4. What are the actions that I should take today to better protect myself from developing kidney disease?