

Chronic Kidney Disease (CKD)

What is CKD?

Kidney disease means any abnormality of the kidneys, however mild. Chronic means a condition that does not get completely better. It does not necessarily mean that the kidney disease is severe; most patients with CKD have only a very slight abnormality in the kidneys. CKD is a common problem, it may affect 10% of the population and in people aged over 75 years it is present in 1 out of 2 people. This is often due to the normal ageing of the kidneys. The good news is that if you have been diagnosed with CKD, there are lots of things you can do to try and stop it from getting worse.

What causes CKD?

There are many causes, the most common are ageing of the kidneys, high blood pressure and diabetes. Usually CKD cannot be completely cured but it can be controlled. Your GP may arrange tests such as blood tests, urine test to check for protein in the urine and sometimes an ultrasound scan.

How do I know if I have CKD and how severe it is?

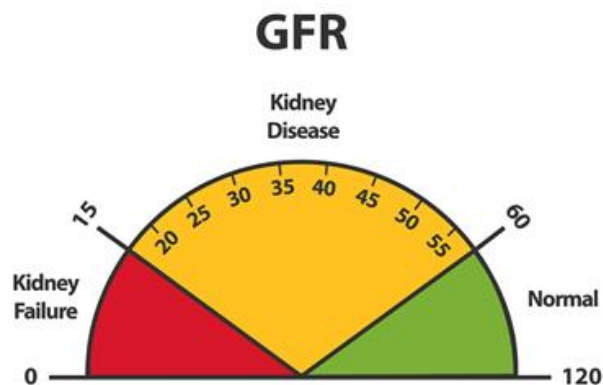
Usually CKD does not cause any symptoms and is detected on a blood test. Severity is identified by a blood test – the eGFR (estimated glomerular filtration rate). This blood test is also used to monitor your CKD, usually once a year if your CKD is in the early stages. Your urine is also monitored for protein and blood in the urine. Protein in the urine is due to chronic damage to the kidneys.

Stages of CKD:

CKD stage 3: moderate impairment of kidney function. eGFR is between 30-60ml/min. Most patients are managed by their GP.

CKD stage 4: more severe reduction in kidney function. eGFR is between 15-29ml/min. These patients are usually referred to a kidney specialist.

CKD stage 5: eGFR is <15ml/min. Dialysis or kidney transplant may be considered.



What is the treatment for CKD?

Whilst there is no cure for CKD, treatment is important to reduce the cause and the rate of decline in renal function. Lifestyle factors are very important and these are discussed below.

Things which your GP will treat as needed include your blood pressure and diabetes. You are also eligible for the annual flu vaccine and the pneumococcal vaccine if you have CKD.

Blood pressure should be treated, depending whether you have protein in your urine, your GP may give you a target blood pressure of less than 140/90 or 130/80. If you have protein in your urine you might be started on a medication called an angiotensin-converting enzyme or angiotensin receptor blocker as these help with protein in the urine and also with blood pressure. If you have diabetes, it is particularly important to control your blood sugar levels and you will have a lower blood pressure target of less than 130/80.

As CKD can be associated with cardiovascular disease, treatment of cholesterol with a statin tablet is recommended and this is something that your GP will discuss with you.

What can I do to help myself?

There are lots of things you can do to help minimise the progression of your CKD:

- Lose weight (if overweight) and take regular exercise
- Eat a healthy balanced diet
- Stop smoking
- Reduce the amount of salt in the diet to help control blood pressure
- Drink about 2 litres of fluid per day
- Drink alcohol within recommended limits (14 units per week)
- Avoid non-steroidal anti-inflammatory drugs such as ibuprofen
- Seek medical review if you have symptoms of urine infection such as frequency of urination, burning sensation, smelly urine, pain in the lower abdomen

What monitoring do I need?

If you have CKD stage 3 you will usually have yearly blood test, urine test and blood pressure checks. If you have significant protein in your urine or CKD 4 then you may have more regular tests.

Will my CKD progress?

This depends on the cause of the CKD. Progression can be limited by the steps above. It is worth noting that people without kidney disease will lose 1ml/min per year of their kidney function through natural ageing. These patients are unlikely to develop severe kidney failure.

Useful information

www.kidney.org.uk – the National Kidney Federation has lots of information on kidney disease

If you have any questions about management of your CKD, or of related conditions such as diabetes or high blood pressure do discuss with your GP. For any questions about lifestyle changes you can discuss with our in-house Health and Wellbeing Team. Our Health and Wellbeing Team can help support you make healthy lifestyle changes. They are non-medical and cannot discuss your clinical diagnosis.

