

Chronic Kidney Disease (stage 3) Information Leaflet

WHY AM I GETTING THIS LEAFLET?

Your most recent kidney blood tests have shown your kidney function has fallen to a level showing chronic kidney disease (CKD). Chronic means persistent or long-term and does not mean severe as some people think. Most people have mild or moderate CKD.

WHAT DO THE KIDNEYS DO?

The job of a healthy kidney is to filter waste from the blood and turn this to urine which is removed from the body.

WHAT IS CKD?

CKD is a condition where the kidneys don't work as well as usual. About 1 in 10 people show some sign of CKD. This is much more common in older people with approximately half of people aged over 75 having some degree of CKD. It is often thought of as a normal ageing process which occurs very slowly, usually over several years.

WHY DO I NEED TO KNOW I HAVE CKD?

Those with CKD have an increased risk of developing heart disease or stroke. There is treatment available to slow the progression of CKD and the risk of developing heart disease or stroke.

WHAT CAUSES CKD?

For many this is often unknown, but we know that in those with high blood pressure and diabetes it is more common. It can also be associated with inflammatory problems or a history of recurrent urine infections.

HOW IS IT DIAGNOSED?

A blood test called the estimated glomerular filtration rate (eGFR) and a urine test to check protein levels in the urine - Albumin-Creatinine Ratio (ACR) helps to diagnose this.

WILL I GET SYMPTOMS?

Usually you will have no symptoms, but in more advanced CKD you may develop:

- Itchy skin
- Tiredness
- Muscle Cramps
- Fluid Retention
- Increased Urinary Frequency

HOW CAN I HELP MYSELF?

- Living a healthy lifestyle including:
- Reduced salt intake

- Eating a healthy diet
- Taking Regular Exercise
- Losing weight if you are overweight
- Stop smoking

WHAT HAPPENS NOW?

You are on a register at the practice for those with CKD. This alerts our staff to ensure appropriate treatments and monitoring occurs.

You will be invited for an annual review usually around your birth month. This will involve having a blood and urine test as well as a Blood Pressure and weight check. You will also be offered a cholesterol lowering medication such as a statin.

As long as this remains stable this is all that is required. If there is any deterioration in your kidney function, then your GP will discuss this further with you.

DO I NEED ANY TREATMENT?

You will be invited to discuss blood pressure lowering medication, cholesterol lowering medication and possibly a newer drug called Dapagliflozin which helps treat Diabetes, Heart Failure and CKD. These drugs will initially require explanation and monitoring and if tolerated can be added to your repeat prescription.

OTHER IMPORTANT THINGS TO KNOW

There are certain medications you should avoid with CKD. The main group are NSAIDs (Non-Steroidal Anti-Inflammatories). These include Ibuprofen, Diclofenac and Naproxen.