

Kidney Health Information

Chronic Kidney Disease – a thief in the night

Chronic Kidney Disease (CKD) is a phrase that embraces the majority of renal conditions. It can be thought of as a thief that works quietly at night, without creating any disturbance. CKD is quite often found by accident when the doctor carries out tests to investigate something else – say a routine employment medical screening and then discovers signs of kidney disease at an early or moderate stage. See [Stages](#) for a short outline of The Stages of Kidney Disease.



If the problem is not discovered, eventually your body will let you know the situation – as well as being ill, the lifestyle you and your family enjoy changes, even your life could be at risk. By this stage it is often too late for any effective preventative measures and a form of Renal Replacement Therapy becomes a life saving treatment.

It is important to detect potential renal problems at an early stage when a little prevention goes a long way in preventing loss of vital kidney function.

At the same time, diagnosis and prevention benefits the heart and circulatory system by controlling high blood pressure, high cholesterol in the blood and encouraging everyone to embrace a healthy lifestyle.

Yes - this definitely means no smoking, eating a healthy nutritious diet as well as taking regular exercise in some form. Your GP and practice nurse will be pleased to guide you on this.

Too often we take our kidneys (like the rest of our bodies) for granted. Because our kidneys work quietly for us in the background, we tend to think this is always so and that our kidneys are indestructible. Without knowing the full implications of Chronic Kidney Disease it is so easy to be complacent about our precious health, sometimes with devastating consequences.

Just a few simple medical checks can lead to an early diagnosis of potential kidney problems and treatments can be extremely efficient. Improvements are frequent. In all cases the progress of these conditions can be very much reduced and possibly even halted.

How can Chronic Kidney Disease be discovered in good time?

If you have any of the following signs, you should contact your doctor:

- Darkness or redness in the urine
- Urine that has an offensive odour
- Urine that looks very foamy
- Frequent urination, sometimes with pain or burning on passing urine
- Any definite change in the amount of urine passed.
- Persistent thirst
- Oedema – swelling of the legs, hands, face
- Raised or high blood pressure
- Back pain in the renal area, especially if there is fever.
- Anaemia
- Tiredness or feeling unwell without apparent cause
- Widespread itchy skin (pruritus.)

These signs can indicate other problems besides kidney disease.

For those who already have high blood pressure or diabetes, it's important that all instructions from your medical team are carefully followed. Poorly controlled blood pressure and diabetes are two major causes of Chronic Kidney Disease.

Other potential causes of Chronic Kidney Disease include large kidney stones and prostate disease. Potentially, injury is caused to the kidneys when the flow of urine out of the body is impeded or blocked.

Glomerulonephritis (a family of different forms of kidney inflammation) can lead to Chronic Kidney Disease. These conditions affect the glomeruli, the fine filters in our kidneys. At one time, these diseases were collectively known as Bright's Disease – before modern research identified them as separate conditions.

A fresh urine sample can be checked for visual changes, like the presence of blood or a very dark colouring, cloudiness or a very frothy appearance.

If there is a bad odour, an infection may be suspected. Most infections are short lived (acute), but can become chronic. Chronic Pylonephritis is a persistent infection of the kidneys – damage can be caused that contributes to Chronic Kidney disease and eventual kidney failure.

It takes only a few simple steps to identify potential kidney problems:

Simple dip stick tests in the surgery on the urine can reveal blood, white cells or signs of protein, as well as sugar if diabetes is suspected. Blood tests are used to identify more precisely what is happening and whether there are kidney problems.

The urine may show signs of other material have been passed – these can also be examined.

If a tumour is suspected then a sample can be sent for cytological testing – a more specialised microscopical examination.

If your doctor wants to arrange a blood test, several substances can be examined from just one blood sample. These include:

- Urea
- Creatinine
- Sodium
- Potassium
- Calcium
- Phosphate
- Bicarbonate
- Cholesterol
- Total protein
- Albumin
- Glucose (a 'fasting' sample)

For further information on kidney tests, go to:

[Kidney Tests](#) on the website of EDREN

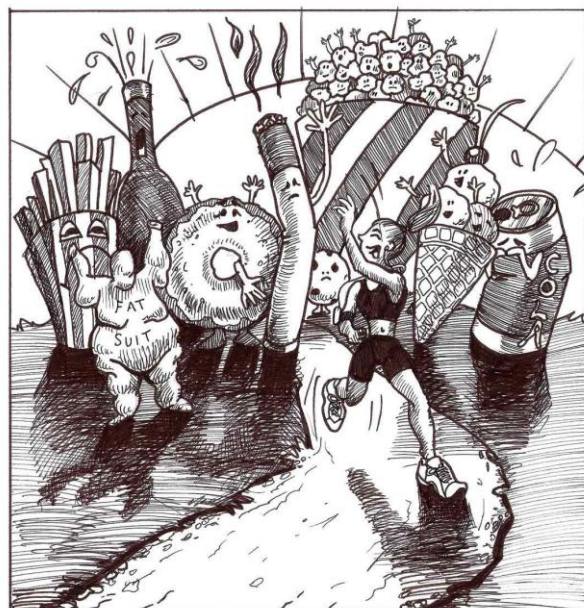
‘Normal’ values for the tests are also given here as well as further information of the eGFR (estimated Glomerular Filtration Rate) and how this is calculated. Be warned – this does get quite technical!

[World](#) Kidney Day 2008 – see eGFR

During the progression of kidney disease, renal function becomes less and less efficient. This can often lead to renal vascular disease – a condition that narrows the blood vessels carrying blood to the kidneys. This is frequently associated with high blood pressure, heart disease and kidney failure – not a good combination, as this situation is much more difficult to manage. At this stage, Chronic Kidney Disease is well advanced. The options of treatment that include Renal Replacement Therapy – all the forms of dialysis and kidney transplantation – become more limited and difficult to manage. Have a look at our own [‘Stages’](#) Fact sheet for an outline of the progression of kidney disease and how kidney function results relates to treatments:

This is why it is so important that the first signs of potential Chronic Kidney disease are found early, when diagnosis and treatment are easy. It is possible to slow down or even stop the progression of kidney disease, but should chronic kidney disease become a lifestyle, then the full range of treatment options remain available, so long as kidney disease has not progressed too far. These of course include lifestyle options:

- Control of high blood pressure
- Good management of diabetes, if present.
- Healthy diet, with plenty of fresh vegetables and fruit, less of the processed pre-prepared fat and sugar rich foods.
- Cutting back on salt (sodium) and not taking salt substitutes (potassium!).



Where kidney disease is more developed, a dietician is able to tailor a kidney friendly diet to each person's tastes and lifestyle.
For more explanation on 'kidney' diets, see

[Diet](#) in Renal Failure and CKD on the website of EDREN

Again this is quite technical, but very interesting.

We spend so much time and money on security for our property and material goods – yet the chronic kidney disease statistics show that our own health has a low priority. With early diagnosis and expert care, only a small proportion of those with Chronic Kidney Disease will go on to need dialysis or a transplant.

It is easy to take those first few steps towards securing kidney health – why not make contact with your local surgery and get those easy checks done!

For more information please see

[Kidney](#) Early Evaluation Programme (KEEP)

[Quality](#) improvement in Chronic Kidney Disease (CKD) a significant challenge for primary care

Please be aware that we have made every effort to ensure this information is accurate, however we cannot guarantee that there are no mistakes. Also, the best management plans for individual patients may vary from those outlined here. Only the doctors caring for the patient will be able to advise on this. Please consult your own doctor.

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