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CHRONIC RENAL (KIDNEY) IMPAIRMENT

Renal impairment means that the kidneys aren't working properly. The word 'chronic' means that the impairment is long-term and unlikely to return to normal. It can deteriorate with time but there are things that can be done to protect your kidneys as much as possible.

Chronic renal impairment is also known as 'chronic kidney disease (CKD)' or 'chronic renal failure (CRF)'. It is more common in people who have high blood pressure, arterial disease (including coronary heart disease and strokes) and diabetes mellitus.

How do you know about chronic renal impairment?

As **most people with chronic renal impairment have no symptoms**, it is usually only diagnosed after blood tests. As your kidney function deteriorates, you might develop any of the following symptoms: poor appetite, nausea and vomiting, tiredness, fluid retention (swollen ankles or shortness of breath), itch, cramps, or restless legs. However there can be other explanations for these symptoms – please seek advice from your GP if you have concerns.

What about progression?

For some reason, once kidneys have been damaged, they may continue to get worse over months and years, even long after the disease that caused the damage has gone. This is more likely if you have high blood pressure, and if there is much protein leaking into the urine.

Renal impairment that requires dialysis or a kidney transplant to keep you alive is known as 'end stage renal failure' (ESRF). Chronic renal impairment is not generally curable but deterioration towards ESRF can often be delayed or prevented – particularly by the treatment of high blood pressure.

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What do kidneys do?

- filter and remove toxic waste products
- filter and remove excess water and salts
- play a part in controlling your blood pressure
- produce erythropoetin, which stimulates red blood cell production from the bone marrow – you get anaemic without this
- help to keep calcium and phosphate in balance for healthy bones
- maintain the blood in a neutral (non-acid) state
- Stages of kidney disease

In the last few years a useful classification of renal impairment has been developed. It relates to your GFR (glomerular filtration rate), which can now be estimated with a blood test. The glomerulus is the filtering system within the kidneys, and the GFR represents how much fluid can be filtered by your kidneys every minute. Roughly speaking, the GFR is equivalent to the percentage of renal function left.

The stages of kidney disease are:

Stage	GFR	Description
3	30-59	Moderately reduced renal function
4	15-29	Severely reduced renal function
5	Less than 15	End stage renal failure

(Stages 1 and 2 relate to people who have a higher GFR but other kidney abnormalities, such as polycystic kidney disease). Symptoms are unlikely until stage 4.

What treatment is required?

Some kidney diseases require specific treatment that will help that particular problem. Here we are describing general treatment that may be required for anyone with renal impairment, whatever the cause.

Blood pressure

Most people will have to take medication to control blood pressure. Excellent blood pressure control has been shown to slow down the progression of chronic renal impairment, in addition to the benefits to the heart and blood vessels elsewhere in the body. Different medicines suit different people, but often an ACE inhibitor (or a similar drug) will be recommended, as these are particularly good for kidney diseases. Your doctors will advise you about this.

Prevention of heart disease, stroke and vascular disease

People with kidney disease are at greatly increased risk of heart disease, stroke and problems with the circulation. It is particularly important that you should not smoke as this increases the risk of heart disease even further. You should also attempt to maintain a healthy diet and take regular exercise. Cholesterol and other lipids are often high in kidney disease, this may require special medication.

For severe renal impairment

Other issues that often require treatment include problems with fluid and salt balance, anaemia and bone weakness.

What can I do?

- Don't smoke.
- Avoid anti-inflammatory drugs (including some that can be bought without a prescription, such as ibuprofen) unless they are approved by a doctor who knows about your kidney problem. They can sometimes worsen kidney function in people with damaged kidneys.
- Eat a healthy diet, and follow the recommended special diet if you have one. Most people should restrict their salt intake.
- Take regular exercise if possible.
- Try to stick to your ideal weight.
- Be sure to have your blood pressure checked regularly and to take treatment that is prescribed for it.

Further information is available from:

The National Kidney Federation www.kidney.org.uk tel: 0845 601 0209

(Most available information relates to people with severe renal impairment)