



Kidney Disease

Simple Testing

Chronic Kidney Disease (CKD) is:

- The persistent and usually progressive reduction in glomerular filtration rate (GFR less than 60 mL/min/1.73 m²), and/or
- Albuminuria (more than 30 mg of urinary albumin per gram of urinary creatinine).

Simple Testing is Needed to Detect Early CKD

Test adults with:

- Diabetes once a year.
- Hypertension at diagnosis and initiation of therapy — then, if normal, every 3 years.*
- A family history of kidney failure every 3 years as long as the tests remain normal.*

* This testing interval is opinion based. Use your discretion.

Use these independent tests to detect CKD:

- Serum creatinine applied to a prediction equation to estimate GFR is preferable to a 24-hour urine collection (see GFR Calculator below).
- A spot urine albumin to urine creatinine ratio is preferable to 24-hour urine collection for albumin excretion.
- Get blood pressure checked.

Use or download the GFR Calculator at www.nkdep.nih.gov.

- You will need to fill in the values below:

Plasma or serum creatinine (mg/dl)	
Age	
African American	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female



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Prevention and Treatment

Prevention is Possible and Early Treatment Can Slow Progression and Reduce Cardiovascular Risk

For patients with a family history of CKD:

- Advise patients to take action to prevent hypertension and diabetes.

For patients with diabetes or hypertension and CKD:

- Prescribe angiotensin converting enzyme inhibitor or angiotensin receptor blocker to protect kidney function.
- A diuretic should usually be part of the hypertension regimen.
- Keep blood pressure below 130/80 mmHg.

It is also important to:

- Provide referral for dietary counseling. (Medicare will pay for nutrition counseling for CKD.)
- Advise tight glycemic control for patients with diabetes.
- Monitor and treat traditional cardiovascular risk factors, particularly smoking and hypercholesterolemia.
- Refer patients to a nephrologist for an early opinion.
- Provide on-going primary care.
- Team with a nephrologist once the GFR is 30 mL/min/1.73 m² or less.

To order NKDEP materials for your practice, call 1-866-4 KIDNEY or visit our website at www.nkdep.nih.gov.



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