

Diabetes & High Blood Pressure

Make the Kidney Connection



What African Americans
Need to Know



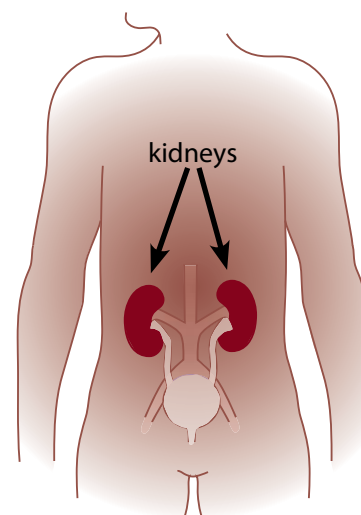
Early kidney disease does not make you feel sick. The only way to know if you have kidney disease is to get tested. The sooner you catch kidney disease, the sooner you can take steps to keep your kidneys healthier longer.

Take the first step and talk to your doctor or nurse about your kidneys. Ask if you should be tested for kidney disease.

Have you talked to a doctor or nurse about your kidneys?

If you have diabetes or high blood pressure, ask about your kidneys at your next doctor's appointment. Both of these conditions can damage your kidneys and lead to kidney disease.

Kidney disease from diabetes or high blood pressure does not go away. Instead, it gets worse over time. If not treated, kidney disease can lead to kidney failure, where your only options are dialysis or a kidney transplant.



You have two kidneys located near the center of your back. Their job is to filter your blood. Small blood vessels in your kidneys remove waste and extra water and produce urine. Diabetes and high blood pressure damage these blood vessels and can cause kidney disease.

Risk factors for kidney disease

Diabetes (sometimes called “sugar”) and high blood pressure are the leading causes of kidney disease.

High blood pressure and diabetes can damage your kidneys over time, without you knowing it. People with diabetes and high blood pressure need to get tested regularly for kidney disease.

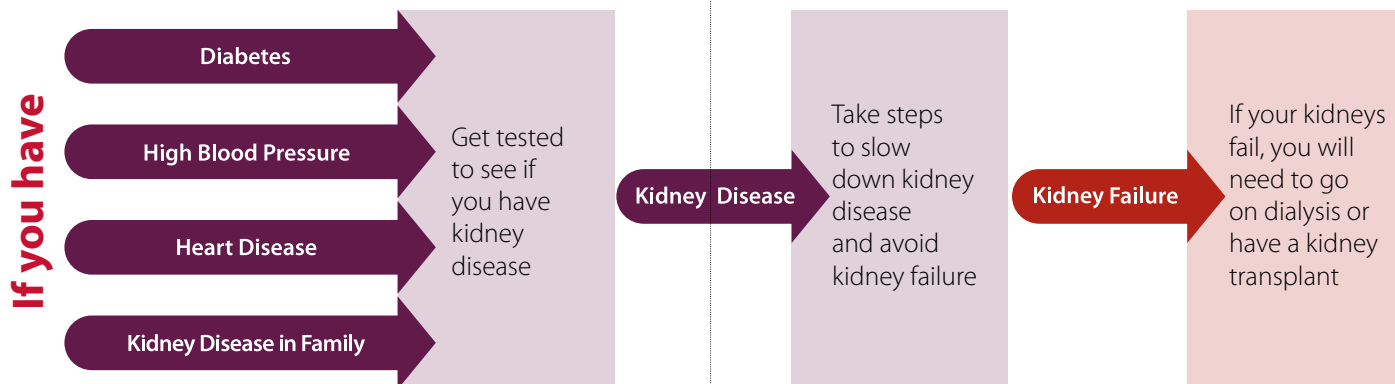
You are also at risk for kidney disease if:

- you have heart (cardiovascular) disease;
- your mother, father, sister, or brother has kidney disease; or

- your doctor has said you have protein in your urine (protein can leak into the urine when the kidneys are not working well).

African Americans are at high risk for kidney failure. In large part, this is due to higher rates of diabetes and high blood pressure in the African American community, although there may be other reasons.

If you have any of these risk factors, talk to your doctor about getting tested for kidney disease.



Diabetes, high blood pressure, heart disease, and a family history of kidney disease can all lead to kidney disease. Taking steps to control your diabetes and high blood pressure can keep your kidneys healthier longer and possibly prevent kidney failure.



Take these steps to protect your kidneys:

1. Keep your kidneys healthy by managing your diabetes and high blood pressure. You can do this by:
 - eating healthy,
 - staying active, and
 - taking medicines as prescribed.
2. Ask your doctor or nurse to test your blood and urine for kidney disease.
3. If you have kidney disease, talk to your doctor or nurse about treatment options. Medicines called ACE inhibitors and ARBs can help keep your kidneys healthier longer.

Blood and urine tests are used to find kidney disease.

Tests for kidney disease:

- A blood test helps your doctor measure your GFR,* which tells you how well your kidneys are working.
- A urine test measures the amount of protein in your urine, which checks for kidney damage.

*GFR stands for “glomerular filtration rate.”

Make sure your doctor tells you:

- your **GFR**,
- how much **protein** is in your urine, and
- your **blood pressure**.

For more information

About kidney disease:

Call the National Kidney Disease Education Program (NKDEP) toll free at 1-866-4 KIDNEY (1-866-454-3639), or go online at www.nkdep.nih.gov.

More kidney information also is available at www.kidney.niddk.nih.gov.

About diabetes:

Contact the National Diabetes Education Program (NDEP) at 1-800-438-5383, or visit www.ndep.nih.gov.

About high blood pressure:

Contact the National High Blood Pressure Education Program (NHBPEP) at 1-800-575-WELL (1-800-575-9355), or visit www.nhlbi.nih.gov/about/nhbpep.



U.S. Department of Health
and Human Services
National Institutes of Health



NKDEP, a program of the National Institutes of Health, aims to improve early detection of kidney disease, help identify patients at risk for progression to kidney failure, and promote interventions to slow progression of kidney disease.