Kidney Disease FAQs

1. What is kidney disease?

Your kidneys are vital organs. They filter and clean your blood and remove waste by making urine. Your kidneys also do other crucial jobs, including:

- Control chemicals and fluids in your body
- Help control your blood pressure
- Help keep your bones healthy
- Help your body make red blood cells

Having kidney disease means your kidneys are damaged and cannot do their job as well as they should. Kidney disease does not happen overnight—it is the result of a gradual loss of kidney function. Specific lifestyle changes and other treatments can help prevent or slow damage to the kidneys.

2. What are the risk factors for kidney disease?

Risks for developing kidney disease include:

- Diabetes (type 1 or 2)
- High blood pressure
- Heart and blood vessel diseases (cardiovascular disease)
- Smoking
- Obesity
- Being Black, African American, of African descent, American Indian or Alaskan Native, or Asian American or Pacific Islander
- Family history of kidney disease
- Abnormal kidney structure
- Older age
- Recreational drug use (such as cocaine, marijuana, and methamphetamine)
- Damage to kidneys from certain medications such as chemotherapy drugs, certain over-the-counter pain relievers, non-steroidal anti-inflammatory medicine (such as ibuprofen) and overuse of prescription pain medication

3. Why are Black and Brown people more at risk for kidney disease?

Black Americans are almost four times as likely as White Americans to develop kidney failure. While Black Americans make up about 13% of the population, they account for 35% of people with kidney failure in the United States. Diabetes and high blood pressure are the leading causes of kidney failure among Black Americans. Genetic variants in people who are African American, Afro-Latino, Afro-Caribbean or of African ancestry lead to a higher risk of kidney disease and faster kidney damage. Many people of African ancestry with hard-to-control high blood pressure and kidney damage have a variant of the APOL1 gene that causes their kidney disease. A kidney doctor, called a nephrologist, can help choose the best treatment options for a Black American with kidney disease if they know the patient has the high-risk APOL1 genetic variant.

A growing number of Americans with Hispanic or Latino heritage are diagnosed with kidney disease each year. Since 2000, the number of Hispanic or Latino people with kidney failure has increased by more than 70%. Compared to non-Hispanic/Latino people, they are almost 1.3 times more likely to be diagnosed with kidney failure, often caused by diabetes and high blood pressure.

4. What are the most common symptoms of kidney disease?

Some symptoms of kidney disease are non-specific, meaning other illnesses can cause them. Sometimes, signs and symptoms may not appear until irreversible damage has occurred. Symptoms include:

- Fatigue
- Weakness
- Nausea
- Difficulty concentrating
- Trouble sleeping
- Dry, itchy skin
- Frequent urge to urinate
- Blood in the urine
- Feeling cold when others are warm
- Feeling faint or dizzy
- Ammonia-like breath
- Foamy or bubbly urine
- Puffiness around the eyes
- Loss of appetite
- Swelling in the ankles and feet
- Muscle cramps
- High blood pressure
- High cholesterol
- Shortness of breath after minimal effort
- Food tastes like metal
- Pressure when you urinate

5. How can I have kidney disease if I feel okay?

Early on, kidney disease may not cause any symptoms because the damage to your kidneys is still mild. Your kidneys compensate for this damage by working even harder. Lab tests, including urine and blood tests, are the only way to detect kidney disease at this early stage. Most people do not notice symptoms until the kidney damage is severe, so it is essential to check your kidney function annually and know your genetic risk for kidney disease.

6. Is kidney disease inherited or passed on through family members?

You may be more likely to get kidney disease if you have a close relative with kidney disease. You get your genes from your parents, and your genes can also make you more at risk for (or help protect you from) diabetes, high blood pressure or kidney disease.

7. How do I get tested for kidney disease?

Kidney disease often shows no symptoms until your kidneys are irreparably damaged, meaning the only way to know how well your kidneys are working is to get tested. This process is essential for people who have diabetes, high blood pressure or a family history of kidney disease. Diagnostic tools may include:

- Ordering blood tests to determine how well your kidneys filter waste by measuring your levels of creatinine (a waste product found in your blood).
- Ordering urine tests to check for protein or blood in your urine.
- Measuring your blood pressure. High blood pressure can both cause kidney disease and be caused by kidney disease.
- Your doctor may order other tests as needed, such as x-rays, a kidney biopsy, ultrasounds or scans.

8. What should I do if I am diagnosed with kidney disease?

Gather your questions and ask your doctor about your condition and treatment. Ask what type of kidney disease you have and let your doctor know of any immediate family member who also has kidney disease, such as a parent, grandparent or sibling, or of other close family members, such as aunts or uncles. Telling your doctor about family members who have kidney disease or have been on dialysis or received a transplant is crucial so your doctor can better understand your kidney disease and how to treat it.

9. How is kidney disease treated?

While we do not always know what causes kidney disease, determining the cause can help you find the best treatment. The main treatments for kidney disease are medications. Some medicines can stop further damage to your kidneys. Doctors will prescribe blood pressure medications to people with kidney disease. Other common medications used for treating kidney disease include prednisone (a type of steroid) and other immunosuppressants, which help to keep your immune system in check. If your kidneys are severely damaged, your doctor may prescribe dialysis treatments and/or a kidney transplant.

There are currently several new medical therapies for treating kidney disease in development and tested through clinical trials. Participating in a clinical trial is another option for you and your doctor to consider while treating your kidney disease. You will be closely monitored and will have better and more frequent access to expert care. Learn more about clinical trials at KidneyHealthGateway.com.

10. Is there a cure for kidney disease?

There is no cure for chronic kidney disease at this time, but treatment can help relieve the symptoms and stop them from getting worse. Your treatment will depend on the stage of your chronic kidney disease. The main treatments are lifestyle changes in order to help you stay as healthy as possible.

11. Why is maintaining healthy blood pressure important to controlling kidney disease?

High blood pressure can damage the blood vessels in your kidneys. If the blood vessels become damaged, your body cannot deliver enough blood to the filters in your kidney, causing the filters to weaken or harden. Elevated blood pressure causes parts of your kidney to stop working, meaning it can no longer remove wastes and extra fluid from your body. For most people, their blood pressure should be kept at 120/80. Ask your doctor for your specific blood pressure goal.

12. How can I protect my kidneys?

The following are some tips to protect your kidneys and keep them healthy:

- Keep active and fit.
- Control your blood sugar (under a doctor's supervision).
- Monitor your blood pressure. The normal range is 120/80.
- Monitor your weight and eat a healthy diet. Work with a certified dietitian.
- Drink plenty of water and refrain from sugary drinks.
- Do not smoke.
- Be aware of the number of over-the-counter medications that you take and let your doctor know.
- Have your kidney function tested if you are at high risk.
- Limit alcohol consumption.

13. Does kidney disease increase my risk for other health problems?

If your kidneys are damaged and not working correctly, you are at greater risk for other health issues. For instance, kidney disease increases your risk for heart disease and stroke. The kidneys also help make red blood cells that carry oxygen throughout the body. If your kidneys are not working as they should, your red blood cell level can drop too low, causing anemia. Having kidney disease can also lead to high levels of phosphorus and potassium in your blood. High phosphorous levels can drain your bones of calcium and weaken them. High potassium levels can increase your risk for heart rhythm problems, which can be dangerous.

14. What happens if my kidneys stop working?

Kidney disease can lead to kidney failure. Kidney failure means your kidneys no longer work, which causes toxins, waste products and fluid to build up in your body. There is no cure for kidney disease, but life-saving treatments are available if your kidneys fail. Dialysis is a treatment that filters your blood and removes toxins, waste products and excess fluids. You may also be a candidate for a kidney transplant. A kidney transplant is not a cure. It is a treatment and it allows many people to live longer.

15. What is a nephrologist?

A nephrologist is a type of doctor who specializes in diseases and conditions that affect the kidneys. They work to treat conditions such as chronic kidney disease, kidney infections and kidney failure. Not only do nephrologists have expertise in diseases that specifically affect the kidneys, but they are also knowledgeable about how kidney disease or dysfunction can affect other parts of the body.

16. How do I know if I need a nephrologist?

Although your primary care doctor will work to help prevent and treat the early stages of kidney disease, your doctor may refer you to a nephrologist to help diagnose and treat more severe or complex kidney conditions. For help finding the right nephrologist for you, check out our Finding the Right Doctor checklist.

NEPHCURE®
Kidney International

References:

https://www.cdc.gov/kidneydisease/index.html

https://nephcure.org/2019/05/the-genetic-fsgs-discovery-trailblazing-possible-kidney-disease-treatment/