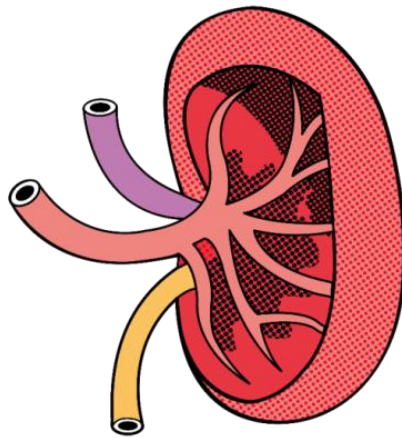


Patient Information

# How to look after your kidneys



# How to look after your kidneys

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## Introduction

You have been given this booklet because you have a problem with your kidneys. This means that your kidneys have some damage and are not working fully. It can be a huge shock when you are first told that you have a kidney problem so we hope that this booklet will answer some of your questions and stop you from worrying. Kidney damage does not get worse for many people and can usually be managed by you in partnership with your health care team (your doctor or nurse).

This booklet describes how to look after your kidneys and keep yourself healthy. It also explains what to expect when you first meet the kidney team (either in clinic or in an education session).

The booklet has been designed in separate chapters so you can read the sections that are relevant to you at a particular time, or you may decide to read the booklet in one go.

If you have any questions, big or small, staff at the kidney clinic are always happy to answer them.

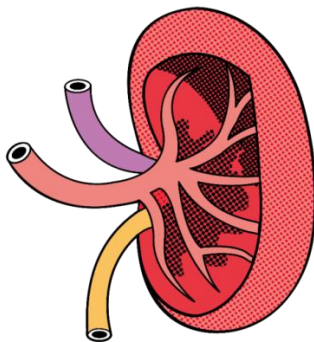
Our contact details are at the back along with a list of useful organisations if you need more information.

## Normal kidney function

Your kidneys lie either side of your backbone and below your ribs. Most people have two kidneys although it is possible to have normal kidney function with only one kidney. The kidneys are the key organs involved in filtering blood to produce urine (pee). Urine contains the waste products which your body does not need any more.

Your kidneys:

- Take away waste products from your body
- Control the amount of water in your body
- Help control blood pressure
- Help produce red blood cells (to stop you getting anaemic)
- Help to keep your bones healthy



Each kidney contains approximately 1 million tiny filters. Each filter (also called a glomerulus) is made up of extremely small blood vessels that allow waste products and water to pass into your urine.

Most kidney damage is caused by damage to these blood vessels. If you have a health condition that damages the blood vessels in your body, then you will be at higher risk of developing a kidney problem. This includes conditions such as diabetes, high blood pressure, heart disease and being overweight.

We also know that people with a family history of kidney disease, and those from Black, Asian, and other minority ethnic backgrounds are more likely to develop kidney failure

than others. Adopting a healthy lifestyle can reduce the chance that this will happen.

## How do we detect kidney damage?

Most people with kidney problems feel well and kidney damage is often picked up by a routine test that is done for another reason. Kidney damage may be detected in a number of different ways, including blood and urine tests.

The tests may show that you may have only one or all of these changes:

- The kidneys may leak protein into your urine
- Waste products may build up in your blood
- You may have very high blood pressure
- An ultrasound scan may show that the kidneys look abnormal



The presence of kidney damage is called chronic kidney disease or CKD. Sometimes doctors call this nephropathy. Chronic means that the condition is long-term, but it can often be controlled, and most people can reduce further kidney damage by taking medicines from their doctor and following a healthy lifestyle. A very small number of people go on to develop severe kidney problems, so it is important to attend the

appointments with your doctor or nurse for your routine checks.

## **Waste products in your blood**

We use the results of your blood tests to calculate how good your kidney function is. The result is called the estimated Glomerular Filtration Rate (GFR) or your kidney number. This is the rate at which the kidneys filter blood and it gives us a rough idea of the percentage of function left in your kidneys. It is useful to know your kidney number so you can track any changes over time.

The waste product that we use to measure your kidney function is called creatinine. This comes from muscles so the amount of creatinine in blood is naturally higher in people with a large muscle mass and lower in people with less muscle.

## **Protein in your urine**

Protein passes into the urine when the filters inside the kidneys have become damaged. A very high level of protein in your urine is an indication that kidney damage is more serious, and you may need to take extra tablets to reduce this. Reducing the amount of protein in your urine can stop your kidneys from getting worse.

The amount of protein in your urine is measured in a test called the Albumin / Creatinine Ratio (ACR). Sometimes in hospital this is measured as Protein / Creatinine Ratio (PCR).

Sometimes the protein level in your urine may be raised for another reason such as a urine infection so you may be asked to repeat your urine test to confirm whether your kidneys are damaged.

## The causes of kidney damage

Often kidney problems are a consequence of getting older. Like the rest of the body, the kidneys wear out with age and are unable to function as well as they did. However, there are other causes of kidney problems. These are the most common:

**Diabetes** Type 1 and Type 2 diabetes both cause kidney problems.

**High blood pressure** (also called hypertension)

**Inflammation of the kidney** (an example is glomerulonephritis)

**Infection of the kidneys** (an example is pyelonephritis)

**Problems with the large blood vessels of the kidneys** (an example is renal artery stenosis)

**Blockage in the urine system** (an example is a large prostate)

**Diseases that run in families** (an example is polycystic kidney disease)

Kidney damage often takes many years to develop and usually both kidneys are affected. It is unlikely that they will get better although it may be possible to reduce further damage.

Adopting a healthy lifestyle is good for your kidneys and this is good for your heart too.

## The stages of chronic kidney disease (CKD)

A blood test shows us how well your kidneys are working by giving us the result of your kidney number (GFR). A kidney number of more than 60 shows that the kidneys are removing waste products normally, but people can remain well even if the number is well below 60. The kidney number is used to divide kidney disease into stages.

**CKD Stages 1 and 2 (mild or early).** GFR is 60 or more. You have other signs of kidney damage (for example protein in your urine)

**CKD Stage 3 (mild to moderate).** GFR is 30-59. We can detect higher than normal levels of waste products in your blood

**CKD Stage 4 (advanced).** GFR is 15-29.

This is the point at which you might start to feel symptoms and you will be advised to consider treatment for kidney failure

**CKD Stage 5 (kidney failure).** GFR less than 15  
Most people will attend a specialist kidney failure clinic

A urine test (ACR) shows us how likely it is that your kidneys will get worse in future.

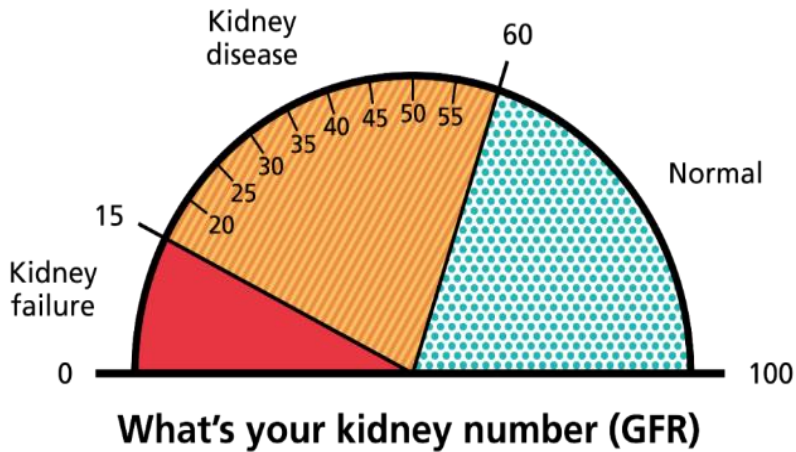
**ACR Stage A1 (normal).** ACR less than 3. Your kidneys will probably stay the same or get worse very slowly.

**ACR Stage A2 (moderately increased).** ACR 3 to 30.

**ACR Stage A3 (severely increased).** ACR more than 30. Medicines can help to stop your kidneys from getting worse.



It is a good idea to ask your doctor or nurse what your kidney number is, so you can keep a track of how well your kidneys are working.



If your ACR is high, then you may be prescribed tablets to reduce the protein being lost in your urine and slow down further kidney damage. There are various types of tablets available such as:

- Angiotensin converting enzyme inhibitor (an example is Ramipril)
- Angiotensin receptor blocker (an example is Losartan)
- Sodium Glucose Co-transporter-2 Inhibitor (an example is Dapagliflozin)

It is likely that you will have to take these tablets for the rest of your life so you should not stop taking them unless advised to by your doctor. Let your doctor or nurse know if they don't suit you as there may be alternatives that you can try.

## Symptoms

Many people with kidney damage will have high blood pressure and some people experience tiredness and need to pass urine more often overnight. It is very unlikely that you will have other symptoms related to your kidney problem until damage is quite advanced. As kidney function gets worse people may develop swollen ankles, cramp in the legs, itchy skin, or reduced appetite. Tell your doctor or nurse if you have any of these symptoms and they might be able to help.

## Checks for changes in kidney problems

The checks that you have will depend upon the stage of your kidney disease. They will often be carried out at your GP surgery and may be part of a general review if you have other health problems. The table on the next page shows examples of the checks you may be called for, but this will vary from person-to-person.

<b>Kidney number (GFR)</b>	<b>Stage of kidney disease (CKD)</b>	<b>Number of checks each year</b>
60-100	1–2	Once per year Blood, urine, and blood pressure check at your GP surgery
30-59	3	Once or twice per year Blood, urine, and blood pressure check at your GP surgery

15-29	4	Every 4 - 6 months Blood, urine and blood pressure check at your GP Surgery or a Kidney Clinic at the hospital
Less than 15	5	Every 3 months Blood, urine, and blood pressure check, usually at a Kidney Clinic at the hospital

Few people feel unwell from kidney damage until their kidney number is less than 20 so these checks are the only way to detect changes in your kidney function and it is important that you attend your appointments.

There is a table at the back of this booklet that you can use to keep a record of your kidney number and how it changes over time (Know Your Numbers, page 33).

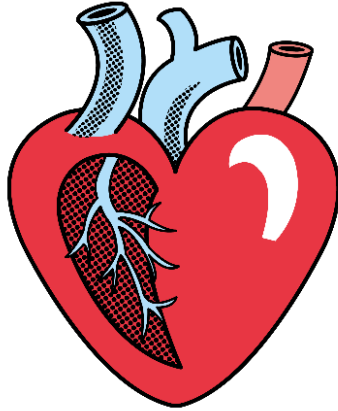
## The future

Kidney damage is common, especially in older people. Only a very few people go on to develop kidney failure, although this partly depends on the cause of kidney damage and whether this can be treated. For example, if your kidneys have been damaged by high blood pressure then improving your blood pressure control will help to stop further damage.

Your doctor or nurse will be able to discuss the cause of your kidney damage and explain what can be done to prevent more damage in the future.

Kidney damage may also be a sign that other blood vessels in the body have been damaged. Although you may not have any symptoms from this it could mean that you are at higher risk of

having a heart attack or stroke. The good news is that adopting a healthy lifestyle is good for your kidneys and will reduce your chance of having a heart attack or stroke too.



The following pages now explain how you can help to look after your kidneys yourself.

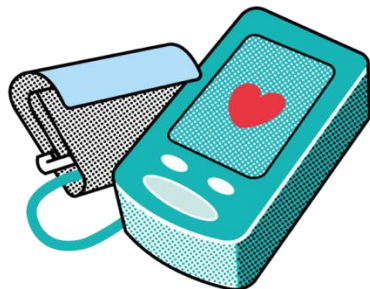
# How to look after your kidneys

## 1. Keep your blood pressure down

If your blood pressure is too high it can damage your blood vessels, and in time this leads to kidney damage. High blood pressure can also increase your chance of having a heart attack or stroke.

These are the most important things you can do to keep your blood pressure under control:

- Reduce the salt in your diet
- Give up smoking
- Take the blood pressure tablets you are prescribed
- Maintain a healthy weight
- Take regular exercise



Many people with kidney problems will need to take tablets to keep their blood pressure down. It is likely that you will need to take these tablets for the rest of your life, and you should not stop taking them without talking to your doctor or nurse.

Blood pressure is measured in millimetres of mercury (mmHg) and is written as two numbers (for example 130/70 mmHg). The first number is the highest level your blood pressure reaches when your heart beats. This should be less than 140. The second number is the lowest level your blood pressure reaches as your heart relaxes between beats. This should be less than 90.

Keep your blood pressure below 140/90 mmHg.

You may be given a different target to aim for, but your doctor or nurse will discuss this with you.

For example, if you have diabetes, you may be given a lower target and might need to keep blood pressure below 130/80 mmHg.

Some people find that their blood pressure becomes high when they are anxious, for example when they visit their doctor or nurse. Your doctor may suggest that you have a 24 hour blood pressure monitor. This will measure your blood pressure at intervals throughout the day and night so gives a much better picture of how your blood pressure changes.

You may decide to measure your blood pressure at home. You can buy a blood pressure monitor from pharmacies or online.

- It is best to use a machine that measures your blood pressure around your upper arm rather than your wrist
- Make sure that you buy a machine that has been validated. The British Hypertension Society has a list of suitable machines (<http://bhsoc.org>) or your pharmacist can advise you on a suitable machine

If you do decide to buy a blood pressure monitor, try not to measure it too often – once per week should be often enough although you may want to measure it more often whenever your tablets are changed.

Home monitoring does not suit everyone – if you think you will worry about your blood pressure readings then this may not be right for you.

## 2. Give up smoking

There are several very good reasons for giving up smoking. Smoking increases your risk of developing several types of cancer, lung disease, heart disease and stroke. It raises your blood pressure and damages the blood vessels throughout your body so makes your kidney problem worse.

### **How do I give up smoking?**

Find out about the medical treatment and support that is available to you from your free local NHS Stop Smoking service. You are four times more likely to quit successfully with their help. Ask your GP to refer you – or you may find a local walk-in service.



You may decide to stop on a certain date and a few weeks ahead of this date tell your friends and family so that they can provide support. Don't forget to throw away all cigarettes, ashtrays, and lighters.

If you start again, stop immediately. It takes most people four or five attempts before they go 'smoke free' for good. Keep trying to stop smoking. You will get there in the end.

### **e-cigarettes (vaping)**

Many people use e-cigarettes (vapes) instead of smoking tobacco and they can help you to stop smoking. Vaping is less harmful than smoking tobacco, but we do not know the long-term effects of vapes because they are so new. If you are vaping to help stop smoking, then you should eventually aim to stop vaping too.

### **Chewing tobacco**

Chewing tobacco is not a healthier alternative to smoking. It increases your risk of cancer and harms your teeth and gums. Chewing tobacco harms your blood vessels and increases your risk of heart disease and kidney disease.

### **Betel nut**

Betel nut chewing increases your risk of cancer and harms your teeth and gums. It increases your risk of type 2 diabetes and kidney disease.

Your local stop smoking service can help you stop chewing tobacco and betel nut.

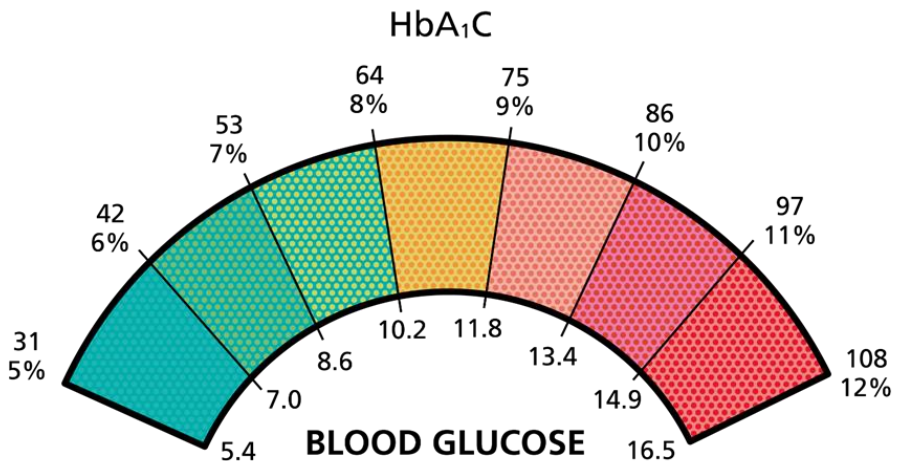


### 3. Control your diabetes

Diabetes is the most common cause of kidney damage. The damage to kidneys takes many years to develop and does not happen to everyone with diabetes.

If you have diabetes, you can greatly reduce the risk of your kidney disease becoming worse by keeping your blood glucose levels well-controlled and making sure your blood pressure and cholesterol remain low.

To ensure that your diabetes remains under control you will need to work in partnership with your diabetes management team. Your HbA<sub>1c</sub> is a measure of your average blood sugar over a three month period and your doctor or nurse will discuss your result with you.



Most people should aim to keep HbA<sub>1c</sub> below 58 mmol/mol (below 7.5%) but your target will be higher if you take insulin. Your doctor or nurse will discuss your HbA<sub>1c</sub> target with you.

If your kidneys are damaged by diabetes, they start to leak protein into your urine. This can be detected by the ACR urine test, and a sample of your urine should be sent for laboratory testing for this every year.

## **Take regular exercise and stay active**

Regular exercise helps lower your blood pressure, manage your weight, and keep your heart healthy. This will in turn protect your kidneys.

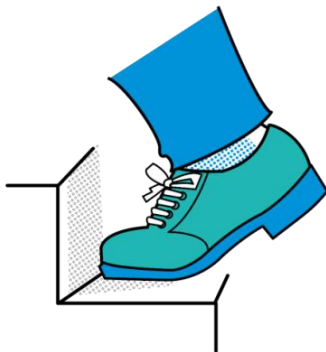
Check with your doctor or nurse before starting to exercise if you have a health condition such as diabetes or high blood pressure.

The best kinds of exercise will make your heart beat a little faster and make you breathe harder, but you should still be able to hold a conversation.

If you haven't been exercising regularly it is best to start slowly for short periods (maybe 10 minutes at a time). As your fitness improves you will be able to exercise for longer. You should aim to build up to 30 minutes of activity five times per week.

Try to think of ways you can build more activity into your daily routine. You don't have to join a gym or take up a sport to get fitter. There are ways of building more activity into your everyday routine such as:

- Walking to the local shops instead of driving
- Taking a walk in your lunch break
- Getting off the bus one stop early
- Taking the stairs instead of the lift
- Doing some gardening



There may be walking groups in your local area. Your GP Surgery or local library will have details.

There are also ways of exercising if you find it difficult to leave the house. For a 10-minute exercise try walking briskly around the house, marching on the spot, climbing the stairs, or stepping up and down on one stair. If you are largely confined to a chair, ask your GP or local leisure centre about chair-based exercises. Even standing up for 10 minutes every hour is better than sitting all day.

## 4. Eat healthily and keep well hydrated

A healthy diet can help protect your kidneys and reduce your risk of heart disease and stroke. It can help you to control your weight and stop you becoming malnourished. Most people with kidney problems should follow guidelines for a normal healthy diet although you may need to see a specialist kidney dietician if your kidney problem is more advanced. Often small changes can have a big impact on your health.

**If you have diabetes, it is important that you follow the advice of your diabetes dietician.**

### **How do I keep to a healthy diet?**

A healthy diet means eating regular meals that contain a variety of foods low in fat, sugar, and salt, and high in fibre. It helps to eat slowly, and not to rush your meal, to avoid feeling hungry when you have finished. Try not to eat snacks between meals that are high in fat or sugar such as crisps, cakes, and biscuits. If you feel hungry between meals try to eat raw vegetables or fresh fruit instead.

Also try to drink plenty of fluid during the day. This can be water, tea, coffee, or flavoured fruit drinks with no added sugar. To keep your kidneys healthy, try to drink more than 1.5 litres per day, which is about 6 mugs or 8 cups or glasses.

**If you have heart failure it is important that you follow the advice from your heart failure team about how much liquid to drink each day.**



## Portion sizes

It is important to maintain a healthy weight to help protect your kidneys. Your doctor or nurse can advise you about what your weight should be. If you want to lose weight it is important to reduce the amount that you eat – using a smaller plate can help you eat less.

## Salt

Salt is removed from our bodies by the kidneys. Too much salt in your diet puts a strain on your kidneys as they remove the salt your body does not need, so reducing salt will help to protect your kidneys. Too much salt can also cause high blood pressure which can make a kidney problem worse.

Most of the salt that we eat is ‘hidden’ in processed or ready-made food (ready meals). To reduce the amount of salt in your diet:

- Don't add salt to your food at the table
- Don't add salt to cooking use herbs, spices, and pepper instead
- Use fewer stock cubes in your cooking
- Eat less processed food such as takeaways, ready-made meals, and soups
- Eat fewer crisps, salted nuts, processed meat (such as bacon and ham) and salted or smoked fish
- Check labels and choose foods that are ‘low in salt’

Rock salt and sea salt are not healthier alternatives to table salt. Celery salt and garlic salt are also mostly salt so should be avoided.

Ready-mixed seasonings are also often high in salt, so it is better to make up your own using individual herbs and spices.

It can be easier to gradually reduce the amount of salt in your diet over a few weeks as you may find food bland to start with. After a few weeks you will get used to the taste and will really notice when you eat something salty.



Don't use salt replacement products such as 'Lo Salt' as these are high in potassium which can be difficult for the kidneys to remove.

### **Sugar**

Sugary foods are often high in calories and contribute to weight gain. Try to eat fewer sugary foods such as cakes, biscuits, and sweets. It is also very important to cut down on sugary drinks such as pure fruit juices, cordials, and fizzy drinks.

Choose products that are labelled 'sugar-free' or 'low in sugar' instead and use artificial sweetener in place of sugar.

### **Fat**

Eating less fat can help prevent you becoming overweight, reduce your risk of heart disease and lower your blood pressure. In particular you should eat less saturated fat to help to reduce the amount of cholesterol in your blood. Cholesterol is a type of fat that can build up in your blood vessels and narrow them. This causes problems with your circulation and makes your blood pressure go up.

- Try to avoid butter, lard and ghee but use small amounts of unsaturated (good) fats such as olive oil, rapeseed and sunflower oils and spreads instead

- Trim all visible fat from meat before cooking and remove skin from chicken
- Choose low-fat dairy products such as semi-skimmed milk, low-fat yoghurts, and reduced-fat cheeses
- Try to avoid frying food. It is better to steam, microwave or grill

## **Fibre**

It is important to include fibre in your diet to reduce your risk of heart disease, stroke, type 2 diabetes, and bowel cancer. Fibre makes you feel full which can help with weight loss and prevents constipation. Foods that are high in fibre include whole grains, beans and lentils, vegetables, and fruits.

## **Protein**

Protein is essential for the body to grow and repair itself, but many people eat more protein than their body needs. Some people eat a high protein diet to help lose weight or build muscle. If you have a kidney problem this extra protein can put a strain on your kidneys as they remove what your body does not need. You should eat smaller amounts of protein as part of a balanced diet. Try to choose more plant-based protein foods such as beans, lentils, tofu and soya and less animal-based protein foods such as meat, fish, cheese, and eggs.

## **The Eatwell Guide**

The NHS website has more information about eating a balanced diet <https://www.nhs.uk/live-well/eat-well/>

## **Making healthy choices**

Food labels can help you to choose products that are lower in salt, sugar and fat. They include information about the number of calories and the amount of salt, sugar and fat contained in one portion.

These are often colour-coded:

- Red means high
- Amber means medium

- Green means low

Try to choose products that are green or amber for salt, sugar, and saturated fat.

## **Alcohol**

Drinking excessive alcohol increases your risks of some cancers, heart disease, liver disease and brain damage. You do not need to avoid alcohol completely if you have a kidney problem, but should follow usual advice:

- Do not drink more than 14 units per week
- Have several alcohol-free days per week

14 units is equivalent to a bottle and a half of wine (12% alcohol) or six pints of standard beer (4% alcohol) over the course of a week – this applies to both men and women.



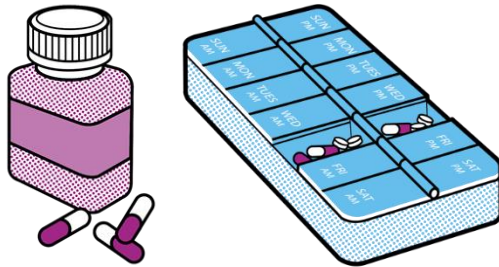
## 5. Take care with your tablets

### Prescriptions

Most people with a kidney problem need to take tablets and your GP will be able to prescribe these. Make sure you keep up to date so that you never run out. Let your GP know if any don't suit you as there may be an alternative you can try.

It can be helpful to always get your tablets from the same pharmacist as they can check that any new tablets are suitable for you.

Some people are prescribed a lot of different tablets and find a dosette box helps them to remember to take them at the right time.



You may be entitled to help with prescription costs if you are on a low income or if you have certain health conditions. If you are not entitled to free prescriptions, it may be cheaper to buy a Prescription Pre-payment Certificate (details on NHS website <https://www.nhs.uk/nhs-services/prescriptions-and-pharmacies/> )

### Tablets without prescriptions (over-the-counter medicines)

Over-the-counter medicines are ones that you can buy from a pharmacy, chemist, or supermarket without having a prescription from your doctor or nurse. Always speak to a

pharmacist and explain that you have a kidney problem before buying any tablets.

It is important that you do not regularly take a type of painkiller called a non-steroidal anti-inflammatory drug (NSAID), such as Ibuprofen (Nurofen®), as this can cause further kidney damage. Paracetamol is a safer alternative painkiller or ask your doctor or pharmacist if you need something stronger.

### **Complementary and herbal medicines**

Talk to your doctor or nurse before you start taking any complementary or herbal medicine. They can contain substances which may be harmful to your kidneys, and they may also interfere with your prescribed tablets.

### **Dietary Supplements**

Dietary supplements are products taken to provide additional nutrition such as vitamins and minerals. Many are classed as foods, so their effects do not need to be checked as carefully as medicines. Some supplements are known to have health benefits, for example vitamin D helps to keep bones healthy.

- No supplements can help repair kidneys or reduce further kidney damage
- Protein supplements put extra strain on the kidneys, and you should not take them if you have a kidney problem.

### **Recreational drugs**

Recreational drugs are chemical substances taken for enjoyment rather than medical reasons. They are usually started to provide pleasure but are often addictive and most are illegal. All recreational drugs can cause health and social problems, and many worsen kidney damage.

If you need help to stop using recreational drugs speak to your doctor or nurse.

## Everyday life

### **Work and benefits**

You should be able to carry on working if you have a kidney problem. If your kidney problem gets worse, you may find that you get tired more easily. Speak to your doctor if you think that your kidney problem is affecting your job.

You might be able to claim one or more benefits if your kidney problem is affecting your job. Before stopping work or reducing your hours it is important that you get financial advice. Your local Citizens Advice Bureau (CAB) can help to explain your options.

### **Travel**

You can still travel if you have a kidney problem, but you may wish to discuss your plans with your doctor or nurse.

If you need to have any vaccinations or malaria prevention tablets check with your doctor to make sure that it is safe for you to take them.

Always make sure that you take enough of your tablets with you.

### **Insurance**

You may find it more difficult or expensive to arrange travel or health insurance if you have a kidney problem. However, it is important that you tell an insurance company that you have a kidney problem when taking out a policy – otherwise you may not be covered. Check the small print and shop around to get the best deal.

### **Sex problems**

Some people who have a kidney problem also develop a sex problem such as being less interested in sex. Sometimes this is related to worry or stress, but some medicines can affect your sex drive too. Men may experience difficulties achieving

an erection and women may experience difficulties reaching orgasm. It is important to talk to your partner if this happens and explain that this does not mean that you have stopped caring about them. Please do not be embarrassed to ask your doctor for advice. There are many effective treatments available.

### **Fertility and pregnancy**

Women with kidney problems remain fertile and you should use contraception if you are sexually active. If you are hoping to start a family talk to your doctor before trying to get pregnant so that you can plan a healthy pregnancy. Your tablets may need to be altered as some are safer in pregnancy than others.

Men with kidney problems are able to father children.

### **Fasting**

During the month of Ramadan healthy Muslims observe abstinence from eating and drinking from dawn until dusk. If you have a kidney problem, you are exempt from fasting because you are at high risk of health complications and fasting can make your kidney problem worse. Your local Imam or our Muslim chaplaincy service can advise you if you have religious belief doubts.

If you choose to fast against medical advice, then you should see your doctor at least 4 weeks before Ramadan to review the tablets that help control your blood pressure and your diabetes. During Ramadan you should remain well hydrated by drinking through the night – at least 8 glasses of fluid (preferably water) for most people. If you are showing signs of dehydration (such as feeling dizzy, not passing urine, or feeling confused) then you should break your fast. If these symptoms do not get better quickly you should seek help from a health care professional.

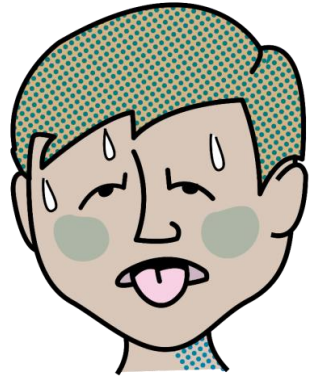
## What to do if you are unwell

If you have a kidney problem, you need to be very careful when you are unwell. Your kidneys are sensitive to infection and dehydration and your kidney function may suddenly get worse when you are ill.

If you have:

- Signs of an infection (a high temperature but feeling cold and shivery)
- Diarrhoea and vomiting

You should try to drink more water and ring your GP if you are not able to keep fluid down.



If you do not start to feel better after 24 hours you should speak to your pharmacist, doctor, or nurse. You may need to stop some of your medicines for a short time or need extra treatment (for example you may need antibiotics if you have an infection).

Your kidney function will usually recover with treatment but it's best to start this as soon as possible.

### **Vaccinations**

Vaccinations can reduce your chance of becoming unwell. You should make sure that you have your flu vaccination (the flu jab) every year.

You may need a pneumococcal vaccination (the pneumo jab) if you have never had one before.

You should have your Covid-19 vaccinations when offered.

Your GP or Practice Nurse will be able to vaccinate you.

## **The kidney service**

Usually, people are referred to the kidney service by their GP who has discovered a kidney problem after a routine blood or urine test, or a very high blood pressure reading. Sometimes the referral comes from another hospital doctor such as a diabetes specialist.

The kidney doctor will not always need to see you in clinic but may discuss your case with your GP. Often your GP and Practice Nurse will be able to provide on-going care and follow up, with advice from the kidney doctor when needed.

### **Further investigations**

More tests may be necessary to help find out the cause of your kidney problem. You may need further blood tests, an x-ray, or an ultrasound scan of your kidneys. This is a painless procedure that uses sound waves to create images of the internal organs.

### **The kidney nurse**

You might be invited to attend an information and education session or clinic appointment with the kidney nurse. The aim of these sessions is to help you understand more about your condition and how to manage it.

### **The kidney clinic (also called Renal Outpatients)**

Sometimes the kidney doctor will need to see you in a hospital clinic. If you are asked to attend the kidney clinic for the first time, please bring your tablets (or a list of them) so that we can see what treatment you are on at the moment.

### **What will happen in the clinic?**

You will see a specialist kidney doctor who will ask you questions about your previous and existing medical problems. They may also record your blood pressure and weight, test your urine, and ask you to have more blood tests. At the end of the consultation the doctor will advise you on treatment or ask that you undergo further investigations to determine the damage to your kidneys more clearly.

### **How often will I have to attend the kidney clinic?**

Many people do not need to continue coming to the kidney clinic once the cause and extent of their kidney problem is identified, but this does vary from person to person. We may ask that you return to the clinic, or your GP may be able to provide on-going care and follow-up.

Make sure that you know who will help you to look after your kidneys and how often you will need to have blood and urine tests to check your kidney function.

Tell your doctor or nurse if you move house so that you don't miss any appointments and if you need to register with a new GP let your new doctor know that you have a kidney problem.

### **Taking part in research**

Clinical research provides the only reliable evidence for safe, effective healthcare. Breakthroughs in medicine would not be possible without research. Because of this, you may be asked about taking part in a research study.

Participation is voluntary: if you do not wish to take part, it will not affect the care you receive.

Your role in a research study could include anything from completing a questionnaire or it could be trying a new



treatment or drug that could help you manage your condition better.

To find out if there are studies available for you, please contact the Renal Research team by

emailing [bartshealth.renalresearch2@nhs.net](mailto:bartshealth.renalresearch2@nhs.net) or call 0203 594 1737

## Further information

Please contact the health care team who are providing your care if you have any questions about your condition or treatment.

You can also contact the organisations below if you would like more general information.

### Blood pressure and blood pressure monitors

#### **The British Heart Foundation**

Tel: 0300 330 3311

[www.bhf.org.uk/high-blood-pressure](http://www.bhf.org.uk/high-blood-pressure)

#### **The Blood Pressure Association**

[www.bloodpressureuk.org](http://www.bloodpressureuk.org)

### Diabetes

#### **Diabetes UK**

Tel: 0345 123 2399

[www.diabetes.org.uk](http://www.diabetes.org.uk)

#### **Diabetes.co.uk**

[www.diabetes.co.uk](http://www.diabetes.co.uk)

### Exercising

#### **NHS website**

[www.nhs.uk/live-well/exercise/](http://www.nhs.uk/live-well/exercise/)

### Healthy eating

#### **BDA the Association of UK Dieticians**

[www.bda.uk.com/foodfacts/home](http://www.bda.uk.com/foodfacts/home)

#### **The British Nutrition Foundation**

[www.nutrition.org.uk](http://www.nutrition.org.uk)

## **NHS website**

<https://www.nhs.uk/live-well/eat-well/>

## **Kidney disease**

### **NHS website**

[www.nhs.uk/conditions/kidney-disease/](http://www.nhs.uk/conditions/kidney-disease/)

## **Kidney Care UK**

[www.kidneycareuk.org](http://www.kidneycareuk.org)

Tel: 01420 541 424

## **NKF Kidney Patients UK**

[www.kidney.org.uk](http://www.kidney.org.uk)

Tel: 0845 601 0209

## **Think Kidneys**

[www.thinkkidneys.nhs.uk](http://www.thinkkidneys.nhs.uk)

## **Stopping smoking**

### **NHS Choices Smokefree website**

[www.nhs.uk/smokefree](http://www.nhs.uk/smokefree)

## **Work and benefits**

### **Citizens Advice Bureau (CAB)**

[www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)

Tel: 0800 144 8848

## **Our contact details**

### **East London Community Kidney Service**

Renal Unit

The Royal London Hospital

London E1 1FR

<http://bartshealth.nhs.uk/renal>

email: [BHNT.Communityrenalservice@nhs.net](mailto:BHNT.Communityrenalservice@nhs.net)

Tel: 0203 594 2665

## Know your numbers

You can use this page to keep a record of your blood pressure, blood, and urine test results.

Ask your doctor or nurse to write in your goals.

Date	Blood pressure	GFR	Urine protein	HbA1c (if you have diabetes)
	Goal: less than	Goal: keep from going down	Goal: the lower the better	Goal: less than

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## **What matters to you?**

You can use this page to write notes about what matters to you.

Or you might want to write down questions that you want to ask your doctor or nurse.

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## Large print and other languages

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. For more information, speak to your clinical team.

এই তথ্যগুলো সহজে পড়া যায় অথবা বৃহৎ প্রিন্টের মত বিকল্প ফরম্যাটে পাওয়া যাবে, এবং অনুরোধে অন্য ভাষায়ও পাওয়া যেতে পারে। আরো তথ্যের জন্য আপনার ক্লিনিক্যাল টিমের সাথে কথা বলুন।

Na żądanie te informacje mogą zostać udostępnione w innych formatach, takich jak zapis większą czcionką lub łatwą do czytania, a także w innych językach. Aby uzyskać więcej informacji, porozmawiaj ze swoim zespołem specjalistów.

Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

یہ معلومات متبادل فارمیٹس میں دستیاب کی جا سکتی ہیں، جیسا کہ پڑھنے میں آسان یا بڑا پرنٹ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید معلومات کے لیے، اپنی کلینکل ٹیم سے بات کریں!

## Tell us what you think

Tweet us [@NHSBartsHealth](https://twitter.com/NHSBartsHealth)

Talk to us via [facebook.com/bartshealth](https://facebook.com/bartshealth)

Leave feedback on NHS Choices [www.nhs.uk](http://www.nhs.uk)

## Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services: [www.bartshealth.nhs.uk/pals](http://www.bartshealth.nhs.uk/pals)

**Reference:** BH/PIN/624

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All our patient information leaflets are reviewed every three years.