

LOOKING AFTER YOURSELF WITH KIDNEY DISEASE

Kidney disease is called a 'silent disease' as there are often no warning signs. It is not uncommon for people to lose up to 90% of their kidney function before getting any symptoms. The first signs may be itching, shortness of breath, nausea and vomiting, bad breath, and a metallic taste in the mouth. For more information see the fact sheet '*All about chronic kidney disease*'.

Once you have been diagnosed with kidney disease, there are many actions you can take to slow down the damage to your kidneys and keep you away from treatment such as dialysis and transplantation for as long as possible.

BLOOD PRESSURE

High blood pressure causes kidney disease and can also occur as the result of damaged kidneys. Control of your blood pressure involves regular monitoring by your health professional and taking medications as prescribed. Your doctor may also recommend that you reduce your salt intake, by avoiding salty foods, processed foods and added salt on food. Managing your blood pressure will not only protect your kidneys, but it will also protect your heart and brain, reducing the risk of a heart attack or a stroke. For more information see the '*Blood pressure and chronic kidney disease*' fact sheet.

DIABETES

If you have diabetes, this may cause damage to the blood vessels in your kidneys. Regular monitoring and careful control of your blood sugars will slow down any damage to your kidneys. For more information see the fact sheet '*Diabetic kidney disease*'.

NUTRITION

Your kidneys are responsible for managing many of the nutrients in your food. They also get rid of any excess water that you drink or eat in your food every day.

Being overweight may also make your blood pressure or your diabetes worse, and you will benefit from aiming for a healthy body weight. It is important to reduce your weight with the support of an Accredited Practising Dietitian, as many of the dietary products on the market may not be healthy for people with kidney disease.

Potassium is a mineral found in many foods. If your kidneys are healthy, they remove extra potassium from the blood. If your kidneys are damaged, the potassium level can rise and affect your heart. A low or high potassium level can cause an irregular heartbeat. Your regular blood tests will indicate when you need to eat less potassium.

Protein is found in meat, fish, legumes and dairy products. As your kidneys fail, one of the waste products your body cannot get rid of is urea, the waste from protein breakdown in your body. You may need to reduce your protein level, but your dietitian will advise if this is necessary.

For more information see the '*Nutrition and kidney failure*' fact sheet.

FLUIDS/DRINKS

Fluid is anything that is liquid at room temperature. As your kidney disease progresses, your doctor may prescribe a tablet called a diuretic to help your kidneys pass more water. As your kidneys fail completely, you may need to restrict the amount of fluid you drink or have in your food each day. Fluid can collect in your tissues and this shows as swollen ankles, hands or abdomen, and breathlessness. An Accredited Practising Dietitian can advise if you need to reduce your fluid intake.

Alcohol can be damaging to the kidneys if you binge drink or have more than 2 standard drinks daily. However, as your kidney damage progresses and your fluid intake is limited, alcohol is not recommended.

Soft drinks and 'energy drinks' are not recommended for regular consumption as they are high in sugar. In particular, taking an excess of cola beverages should be avoided in view of early evidence that they may increase the risk of kidney disease.

EXERCISE

It is important for everyone to do exercise, at a level they can manage without stressing their body. Walking for 30 minutes a day, swimming, and doing the housework are all simple activities that can help to keep your heart fit. Exercise can also help if you need to control your body weight.

Exercise regimes should be started gradually and professional advice is recommended, especially if you have not exercised for a long-time or find you are particularly breathless. If you have chest pain, it is important to cease exercise and seek medical advice.

MEDICATIONS

If you are on medications for your blood pressure or your diabetes, keep taking them.

There are two other medications that you may start as your kidneys fail:

- **Phosphate Binders** - These tablets absorb the phosphate in your food, making it easier for your kidneys to keep your phosphate level normal. There are many types of phosphate binder with many of them having calcium or magnesium as the main 'binder'.
- **Erythropoietin (EPO)** - Your kidneys usually produce EPO but once they fail, EPO production slows down. EPO tells your body to produce red blood cells. These cells carry oxygen around your body, allowing you to be active. Usually EPO is given as an injection and you can be taught to do this yourself.

SMOKING

Smoking causes damages to blood vessels including those in your kidneys, heart and brain. If you smoke, it is important to consider quitting smoking, or at least reducing the number of cigarettes you smoke. This will slow down the damage to your body. Your general practitioner or pharmacist will have advice and products that can help you to quit smoking. Even if you have tried to quit before, it is worth trying again.

GENERAL WELL BEING

Many people with kidney disease experience different emotions at different stages of their journey with kidney disease, from feelings of disbelief to mourning, frustration, despair, fear, lack

of control, and even depression. It is normal to experience these emotions but they should not be long-term.

To help yourself, you may need to talk to a friend, relative or health professional. Social workers and psychologists are specially trained to help you to find solutions to problems that are worrying you.

If you are concerned that you have depression, ask yourself:

- Do I regularly struggle to get out of bed and do daily activities?
- Do I feel as if I am surrounded by a black cloud?
- Do I cry regularly?
- Do I get angry easily for no reason?
- Have I stopped paying attention to how I look?
- Am I eating for comfort or refusing to eat at all?
- Do I consider harming myself?

If you answered yes to one or more of these questions, talk to your general practitioner or health professional who can refer you to a counsellor to help you and determine if medications may help you. Depression is an illness affecting 1 in 5 people with chronic kidney disease, and 1 in 3 individuals on dialysis. For immediate help, you can contact *beyondblue* - 1300 224 636.

INFECTIONS

Your kidney failure may make you a little more prone to infections than usual. Your body does not react as it used to when you are exposed to infections. If you have diabetes, your risk is even higher, but early treatment can prevent serious disease. It is important to seek medical advice for any early signs of infection, such as fever, pain, aches and feeling generally unwell.

FLUVAX

The Fluvax is generally recommended for people with kidney disease. However, some dialysis and transplant medications interact with the Fluvax and may reduce its effectiveness. It is important to talk to your kidney specialist or general practitioner about getting your vaccine.

EDUCATION ABOUT TREATMENT OPTIONS IF YOUR KIDNEYS FAIL COMPLETELY

Some people never need special treatment for their kidney disease. However, if you do, it is important to have education to help you to decide what will be the best long-term treatment for you. Options include:

- transplantation
- home dialysis: peritoneal dialysis or home haemodialysis
- unit based haemodialysis
- non-dialysis supportive care

Education is usually coordinated by a nurse at your renal unit. They will usually meet with you and your family to determine the treatment best suited to your lifestyle. You may also be invited to group education sessions where you may meet other dialysis patients, specialist nurses, social workers and dieticians. Health professionals will support and guide your decision, but ultimately it is your decision.

Education should take place when your kidneys are expected to fail completely within the next 6 months to a year. This will allow you time to consider and research all the options, and then prepare for the treatment option of your choice.

For more information about treatment options, see the 'Live donation', 'Deciding about live donation', 'Home haemodialysis', 'Peritoneal dialysis', 'Haemodialysis', and 'Non dialysis supportive care' fact sheets.

HOW TO MANAGE YOUR HEALTH

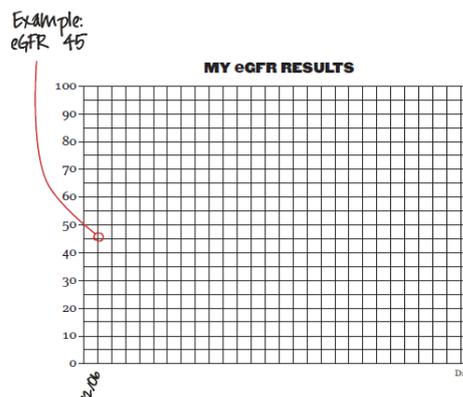
Managing your own health can improve the quality of your physical and mental health, and decrease your reliance on others.

To maintain your health, it is important to self-manage your condition.

Keep records of your health appointments, test results and medications. This way you will be able to follow the developments of your blood pressure, blood tests and urine tests yourself. You may also like to use some graph paper to plot your test results (see example).

Some medications and medical procedures are not recommended if you have kidney disease. It is important that you tell health professionals that you have kidney disease – do not assume that they already know.

This fact sheet provides a brief outline on things to consider if you have been diagnosed with kidney disease. For more information, consider purchasing a copy of 'Living with Kidney Failure' published by Kidney Health Australia.



For more information about Kidney or Urinary health, please contact our free call Kidney Health Information Service (KHIS) on 1800 454 363. Alternatively, you may wish to email KHIS@kidney.org.au or visit our website www.kidney.org.au to access free health literature.

This is intended as a general introduction to this topic and is not meant to substitute for your doctor's or Health Professional's advice. All care is taken to ensure that the information is relevant to the reader and applicable to each state in Australia. It should be noted that Kidney Health Australia recognises that each person's experience is individual and that variations do occur in treatment and management due to personal circumstances, the health professional and the state one lives in. Should you require further information always consult your doctor or health professional.

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If you have a hearing or speech impairment, contact the National Relay Service on 1800 555 677 or www.relayservice.com.au. For all types of services ask for 1800 454 363.