

Eating for kidney health – where to start

One of the most challenging things about kidney disease can be understanding what you should eat and drink. To keep it simple, a diet that protects your kidneys follows the same principles as a healthy diet for everyone. As your kidney disease progresses your food and fluid needs will change. An Accredited Practicing Dietitian (APD) with experience of kidney disease, or a Renal Dietitian, is the best person to speak to about these changes and to find out what food and drinks are right choices for you.

Where can I start with a kidney-friendly diet?

There is no single 'kidney-friendly diet'. It can be helpful to know if any of your blood and urine test results are out of range, and what changes in your diet can assist to bring these results back into range. You can ask your doctor to refer you to an **Accredited Practicing Dietitian (APD)**, who will be able to take you through any changes needed, and breaking the information into small steps that fit with your lifestyle.

What is new in kidney nutrition?

There have been several important changes to the dietary recommendations for people with kidney disease since 2020. This means that some foods which were previously discouraged, like wholegrains, beans, lentils and chickpeas are now known to be beneficial for everyone, including those living with kidney disease.

- Getting enough fruits and vegetables in your diet is protective for our general health and help to prevent acid build-up in the blood, which is a known indicator of kidney disease progression.
- Focus on the quality of the food you eat by choosing whole, fresh, frozen and canned produce instead of packaged items which have been chemically altered and processed.
- Reduce the number of 'processed foods' you eat, which can be identified from a list of chemical names and numbers in the ingredients.

These changes have been shown to be one of the best things you can do for improved kidney health!



Who is this information suitable for?

This information sheet is suitable for adults with any stage of chronic kidney disease, people who are having dialysis treatment or who have opted for comprehensive conservative kidney care. This includes individuals living with polycystic kidney disease, kidney stones, diabetes, people born with one kidney, those who have had kidney transplantation and anyone at increased risk of kidney disease.



The five dietary principles for healthy kidneys:



Eat 2 serves of fruit and 5 serves of vegetables every day... regardless of your stage of kidney disease.



Eat the right amount of protein for your stage of kidney disease. Choose fish, eggs, beans, nuts/seeds and lean cuts of meat in place of foods which have been processed, fried, salted, cured or wrapped in pastry or batter.



Reduce salt by eating less packaged foods and takeaways in your diet. Don't add salt to foods or when cooking.



Choose wholegrain, seeded, and high fibre versions of breads, cereals, rice and pasta where possible.



Make water your drink of choice. Generally, it is recommended to drink to thirst - always check with your healthcare team. Avoid sugar and artificially sweetened drinks, such as soft drinks, fruit juices and other 'zero sugar' drinks.

All people with CKD should avoid ultra-processed foods high in fat, sugar, and salt.

What can I eat if I also have diabetes, or high blood pressure?

Kidney disease is often found in combination with other health conditions, such as diabetes or high blood pressure, and managing these other conditions is essential to protecting your kidneys from further damage.



Blood pressure

If you have high blood pressure or need medications to help with managing it, then following a low salt (low sodium) diet is essential to keep your kidneys and heart healthy.

This pattern of eating is most effective when combined with decreasing alcohol, exercising, and quitting smoking.



Diabetes

If you are living with diabetes, keep your blood glucose (sugar) levels within your target range. Follow a diet low in added sugars, low in refined 'white' carbohydrates, and balanced in vegetables, fruits, beans, lean meats and fish. Following this diet and trying to spread out your portions of wholegrain carbohydrate foods will also help to improve your HbA1c level. HbA1c is a measure of average blood sugars and may predict likelihood of damage to your kidneys.

The recommended amounts of foods to eat each day if you have either of these conditions are:



- 5 serves of vegetables (1 serve is about 1 cup of salad or ½ cup of roast veg and any type counts).



- 3-4 serves of wholemeal and wholegrain foods, or more if you are very active, spread out throughout the day (1 serve is 1 slice of wholegrain bread or ½ cup of cooked wholegrains).



- 2 serves of fruit (1 serve is about a small handful).



- 1 serve of unsalted nuts or seeds can be included most days of the week (1 serve is about a small handful or 30g of unsalted nuts, or 1 tablespoon of seeds).



- 3-4 serves of low-fat dairy or plant-based alternatives per day.

Note: If you are doing dialysis, or have been told to follow a low potassium or low phosphorus diet, check with your dietitian first because this amount is not recommended.



- 1-2 serves of fish, lean skinless meat, vegetarian protein or eggs (1 serve is about the size and thickness of your palm). Including more plant-based unprocessed proteins in your diet is a great way to care for your kidneys.

Note: If you are doing dialysis check with your dietitian first because this amount should be increased.

Eating for kidney disease - frequently asked questions

Why should I eat wholegrain breads and cereals?

Wholegrains break-down more slowly into sugar than 'white' carbohydrates, creating fewer blood sugar spikes. The best wholegrain foods are high in fibre, which provides a steady source of energy throughout the day.

Good examples of these foods include, but are not limited to:

Bulgar wheat, quinoa, barley, steel cut/rolled oats, 100% wholemeal bread, rye bread, brown rice, whole wheat wraps, freekeh.

What exactly are highly/ultra processed foods?

These are packaged foods that contain many additives to ensure they have a long shelf life. They are designed to be ready to eat with minimal preparation needed. These packaged foods can be identified by looking at the ingredient list that contain chemical names and ingredients which we wouldn't find in our own kitchen.

Examples of ultra processed foods include, but are not limited to:

Soft drinks, cakes, pastries, burgers, pies, packet soups and sauces, chicken nuggets, pizzas, cakes, biscuits, ice cream, ready to eat meals, doughnuts, and cookies.

Do I need to limit potassium and phosphorus?



Not everyone with kidney disease needs to reduce their dietary potassium and phosphorus. In fact, for people with CKD stage 1 and 2, a high potassium diet is actually good for you!

Advice about reducing potassium and phosphorus generally only applies if you have reached CKD stage 3b-5 or are doing haemodialysis. Check with your doctor first if you are unsure whether your blood potassium/phosphate levels are too high and if you need to follow a specific diet.

If you have been advised to reduce the potassium or phosphate in your diet, then make sure that you do the following:

1

Reduce the amount of processed and packaged foods. These may contain additives that increase your potassium and phosphorus levels.

2

Reduce your portion size of protein in line with the recommended amount.

3

Eat 2 serves of fruit and 5 serves of vegies each day, as more fibre may help to eliminate waste build up.

Don't change your diet without checking with your healthcare team first.

Eating for kidney disease - frequently asked questions

How much is 'too much' salt?

When buying packaged brands, check the '**per 100g**' column for sodium to help select items mostly from the following groups:

- A 'reduced salt' product contains less than **400mg sodium per 100g**.



- A 'low salt' product contains less than **120mg sodium per 100g**.



Having too much salt has been shown to increase your blood pressure, risk of heart disease and puts our kidneys under increased stress. The average Australian diet contains more salt than is recommended for good health. Reduce the amount of salt you eat by avoiding processed and fast foods, not adding salt at the table, and choosing fresh foods over canned foods. Aim for less than 5 grams of salt per day.

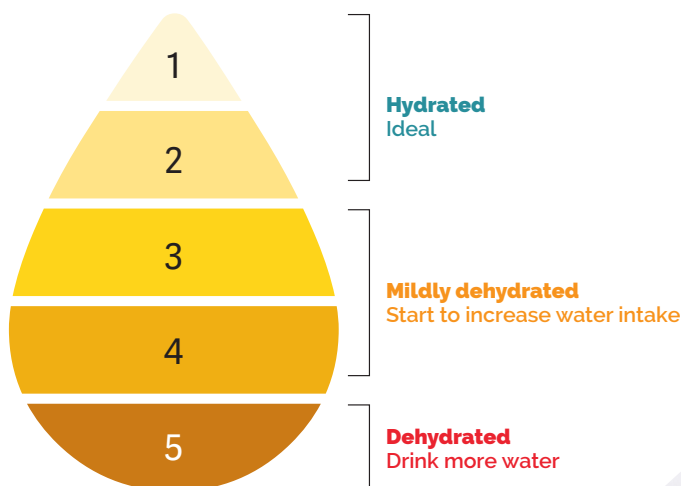
How much fluid is the right amount to drink?

Water is the best liquid for hydration at all stages of kidney disease. How much you need to drink will change at different times in your kidney journey.

For individuals with CKD stage 1-4, kidney stones, polycystic kidney disease or anyone who has received a kidney transplant, the focus should be maintaining good hydration so that your urine is clear or pale in colour at most times of the day.

For CKD stage 5 and kidney failure, you may need to reduce the amount of fluid you have each day, particularly for those having dialysis treatment.

Following a fluid allowance helps to reduce strain on your heart and kidneys, as well as avoid further health complications and unwanted hospital admissions. Your kidney doctor or treating healthcare team will advise you of your ideal fluid allowance. This will vary depending on seasonal weather conditions, your physical activity levels, and your kidney replacement therapy.





Things to remember:

- ✓ Every person with kidney disease is different and has different food preferences and dietary needs.
- ✓ An **Accredited Practising Dietitian** is the best person to talk to about diet. They can provide advice that is specific to you.
- ✓ Managing what you eat and drink when you have kidney disease can influence how you feel and what treatments you may need.

What does that word mean?

Accredited Practising Dietitian –

A person who is professionally qualified to give practical diet and nutrition advice.

Carbohydrate – A macronutrient.

Carbohydrates are the body's main energy source and come from mostly grain foods, fruit, vegetables and dairy products. Sugar is also a type of carbohydrate but should be limited from the diet.

Dialysis – A treatment for kidney failure that removes waste products and excess fluid from the blood by filtering the blood through a special membrane. There are two types of dialysis; haemodialysis and peritoneal dialysis.

Haemodialysis – A treatment for kidney failure. Your blood is pumped through special tubing to a haemodialysis machine. The machine acts like a kidney, filtering waste products from your blood before returning it to your body.

HbA1c – Stands for glycosylated haemoglobin, which occurs when haemoglobin joins with glucose (sugar) in the blood. The HbA1c test shows what a person's average blood glucose level was for the two to three months before the test. This can help determine how well a person's diabetes is being controlled over time.

Malnutrition – Lack of proper nutrition, which may be caused by not having enough to eat, not eating enough of the right foods, or when the body is unable to effectively use the food that you do eat.

Peritoneal dialysis – Treatment for kidney failure during which dialysis fluid is moved in and out of your peritoneal cavity to remove wastes and fluid from your blood.

Phosphate – A mineral that, together with calcium, keeps your bones strong and healthy. When your kidneys are not working properly, high levels of phosphate build up in your blood. Too much phosphate causes itching and pain in your joints, such as knees, elbows, and ankles.

Transplant – A medical operation in which an organ or tissue is removed from the body of one person (the donor) and put into the body of another person who is very ill (the recipient).



For more information

To access information about CKD, or kidney health, please scan the QR code.

Free Kidney Helpline 1800 454 363
kidney.org.au



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

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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.