Chronic Kidney Disease

A patient’s perspective

Per Åke Zillén
Per Åke
My kidney function
Mornings:
The consequences of the epidemic of caries

Afternoons:
Dentures
Conclusions:

Prevention
Early detection
Early treatment
Early education
A health (r)evolution

My parents
My generation
My children
My grandchildren
My kidney function

100% to 10% decrease from 1990 to 2001.
My trauma

Healthy individual

Sick patient
My trauma

Healthy individual
Sick patient
Chronically ill patient
My trauma

Healthy individual
Sick patient
Chronically ill patient
Pre-dialysis patient
Pre-dialysis

- Kidney patient
- Reduced Kidney Function, RKF
- CKD patient
## Stages of CKD

<table>
<thead>
<tr>
<th>Stage Description</th>
<th>GFR Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Damage, normal GFR</td>
<td>&gt; 90</td>
</tr>
<tr>
<td>2. Mild reduction of function</td>
<td>90-60</td>
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<tr>
<td>3. Moderate reduction</td>
<td>60-30</td>
</tr>
<tr>
<td>4. Severe reduction</td>
<td>30-15</td>
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<tr>
<td>5. Kidney failure</td>
<td>&lt; 15</td>
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<td>Stage</td>
<td>GFR</td>
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<td>-----------------------------------</td>
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<tr>
<td>1. Kind of OK</td>
<td>&gt; 90</td>
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<tr>
<td>2. Worrying (very much)</td>
<td>90-60</td>
</tr>
<tr>
<td>3. Severe condition, indeed</td>
<td>60-30</td>
</tr>
<tr>
<td>4. Complete disaster</td>
<td>30-15</td>
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<td>5. Life threatening</td>
<td>&lt; 15</td>
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Expectations:

Prevent
Expectations:

Prevent

Cure
EXPECTATIONS

Prevent
Cure
Preserve, Maintain
Expectations:

Prevent
Cure
Preserve, Maintain
Replace
Transplantation

- Transplant
- Medication
- Diet
- Healthy behaviour
Dialysis

- HD or PD
- Medication
- Diet
- Healthy behaviour
“Despite the success of ‘treatments’ for uraemia today, we must recognise all forms of dialysis to be highly expensive palliation which still carries a totally unacceptable mortality...”

Professor Stewart Cameron
“Thus dialysis and transplantation exist and flourish as a result of failure, not of success.”

Professor Stewart Cameron
In stages 2 – 4

Conservative treatment
In stages 2 – 4

Conservative treatment

Radical treatment
Preserve or Maintain the current function
In other words a

“Save-what-can-be-saved-treatment”
The main question:

What can I do myself?
Blood pressure

- Medication
- Regular exercise
- Weight control
- Stop smoking
- Less salt, no extra
- Drink less
- Stress management
- Relax and sleep well
- Get a pet
Balances

- Calcium – phosphate
- Haemoglobin
  - Acidity
- Salt – water
- Potassium
  - Lipids
- Teeth and gums
  - Alcohol
  - Sex
Special diet

- Reduced protein
  0.6 g/kg bodyweight/day
  plus Aminess

- Increased energy
  35kcal/kg bodyweight/day
## The true to-do-list

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<tr>
<th>Patient</th>
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<td>Blood pressure</td>
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<td>Blood sugar</td>
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<td>Balances</td>
</tr>
<tr>
<td>No smoking</td>
</tr>
<tr>
<td>Excercise</td>
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<tr>
<td>Special diet</td>
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The self-management perspective:

MY HEALTH IS MY RESPONSIBILITY

THE DOCTOR IS MY MEDICAL ADVISOR
8,760 hours/year
8,760 hours/year - 5 health care
8 760 hours/year
- 5 health care
8 755 hours/year
= my responsibility
To be able to assume Responsibility

We need proper: Education
Teach vs Learn
Patient and family education:

Aims

- Knowledge
- Motivation
- Behaviour
English title: “Living with reduced kidney function”
To main goals:

1. To stop or slow the progression

2. To minimize the symptoms and the risks for complications
Four steps:

Basic information
Self-care handbook
Empowerment
Follow-up
Total costs of CKD

- Primary health care
- **Specialist nephrology care**
- **Specialist transplantation care**
- Other general/specialist care
- Patients and their families
  - Laboratories – for tests
- The society – for medication
- Social security system(s)
  - Health insurance(s)
  - Society at large
- The employer of the patient
Costs of dialysis:

€900/week/patient

Delayed dialysis savings:

€900/week/patient
My kidney function

100%

1990  2001

10%
Medication = Compensation
My special CKD diet

- Protein down
- Energy up
- Extra aminoacids
- Phosphate
- Potassium
- Etcetera
Healthy behaviour
The outcome

100%

1990 2001 2007

100% 10%
Early detection: HOW?

- No symptoms or clinical signs present
  so
- Tests – the only way
What?

- Albuminuria
- Blood pressure
  - (Creatinine)
Who & where?

- For individuals with risk factors
- In primary care
- Leadership by the nephrology community
“We have to achieve an arrest of progression of renal failure, or better still, prevention.”

Professor Stewart Cameron
Conclusions:

Prevention
Early detection
Early treatment
Early education
Thank You