

Take action to reduce the risk of developing diabetic nephropathy!

To reduce the risk of developing nephropathy or to slow its progress, the primary line of defence is to maintain blood sugar within target levels. It is also important to:

- maintain blood pressure at target levels;
- maintain blood cholesterol at target levels;
- manage weight, if necessary;
- quit smoking or vaping, if applicable.

Ask your pharmacist: certain medications must be stopped temporarily when you are sick to protect your kidneys.

Resources

The Kidney Foundation of Canada kidney.ca

Questions about diabetes?

InfoDiabetes Service 514-259-3422 1-800-361-3504 infodiabete@diabete.qc.ca

Diabetes School

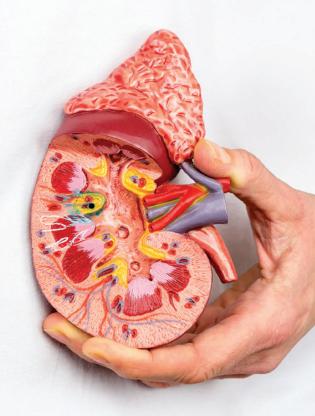






Kidney health and diabetes

Understanding diabetic nephropathy



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What is nephropathy?

Nephropathy is a condition that affects the kidneys. The kidneys act as a filter. They regulate the elements the body needs to keep in the bloodstream, and they eliminate waste and excess elements, such as sodium, sugar and water, in the urine.

Diabetic nephropathy occurs when often high blood sugar damages the small blood vessels of the kidneys. This damage gradually reduces the ability of the kidneys to do their job properly.

Nephropathy increases the risk of developing a cardiovascular disease and is associated with a decline in the duration and quality of life.



What increases the risk of developing nephropathy?

- Having diabetes for a long time
- Often having high blood sugar
- Having high blood pressure
- Having a high blood cholesterol
- Having a weight classified as obese
- Smoking

An insidious condition!

The symptoms of nephropathy generally do not appear until the disease is very advanced. When kidney function is about to stop (end-stage renal disease), the following symptoms can appear:

- Fatique
- Weakness
- Nausea, vomiting
- Swelling
- Generalized itching

The importance of screening!

When kidney function starts to decline, your kidneys excrete substances into the urine that your body needs, like proteins. Although these proteins are invisible to the naked eye, their levels can be measured through urine analysis. In addition, a blood test is done to measure the filtering function of the kidneys.

Schedule for screening tests

	First test	Follow-up
Type 1 diabetes	5 years after diagnosis from the age of 12	Every year or more often when recommended by your doctor
Type 2 diabetes	When diagnosed with type 2 diabetes	
Type 1 or 2 diabetes and pregnancy	Before conception or when pregnancy is confirmed	

How is nephropathy treated?

The damage caused to the kidneys is irreversible; there is no cure. However, in addition to the adoption of healthy lifestyle habits, medication can be prescribed to slow the progress of kidney disease.

If necessary, a diet that restricts proteins, liquids, and specific minerals may also be prescribed, with instruction from a nutritionist.

End-stage kidney disease needs to be treated with dialysis to replace renal function or with a kidney transplant.

Almost half of people with diabetes will be affected by nephropathy during their lifetime.

