WHITE PAPER · ONE PAGE

Chronic kidney disease: what patients and families need to know

Kidney disease is common, quiet, and often caught late. Two lab numbers tell you where you stand, and early action can slow it down.

How big the problem is (United States)

35.5 million
adults estimated to have CKD, about 1 in 7

9 in 10
adults with CKD don't know they have it

360 a day
people start dialysis for kidney failure

808,000
people living with kidney failure (2021); about 69% on dialysis, 31% with a transplant

Diabetes and high blood pressure are the leading causes. Heart disease, obesity, a family history of kidney failure, and being over 60 also raise the risk. Early CKD usually has no symptoms, so testing is the only way to find it.

The two numbers that stage CKD

eGFR (blood test) estimates how well the kidneys filter. **UACR** (urine test) measures protein leaking into the urine, an early sign of damage. Doctors use both.

Stage	eGFR (mL/min/1.73m²)
G1	90 or higher, with signs of damage
G2	60–89, with signs of damage
G3a	45–59
G3b	30–44
G4	15–29
G5	below 15 (kidney failure)

Category	UACR (mg/g)
A1	below 30 (normal to mildly increased)
A2	30–300 (moderately increased)
A3	above 300 (severely increased)

Both numbers need to stay abnormal for 3 months or more to count as CKD. A higher G stage or A category means higher risk.

What slows it down

- Keep blood pressure and blood sugar at the targets your care team sets.
- Ask whether kidney-protecting medicines fit you, such as an ACE inhibitor or ARB, or an SGLT2 inhibitor.
- Check before taking over-the-counter pain relievers like ibuprofen or naproxen (NSAIDs).
- Don't smoke, stay active, and ask for a renal dietitian for sodium, protein, potassium and phosphorus.
- Get eGFR and UACR checked on the schedule your doctor recommends, and keep your own record.

If the kidneys fail: the options

- **Kidney transplant** from a living or deceased donor. Getting evaluated early, even before dialysis, can help.
- **Hemodialysis** at a center (usually 3 times a week) or at home.
- **Peritoneal dialysis**, done at home, often overnight.
- **Conservative kidney management**: care focused on symptoms and quality of life without dialysis.

Plan early. Talking through options at stage 4 gives time for a transplant evaluation or a dialysis access.

Where Kidney Navigator helps

The free Kidney Navigator app keeps labs, blood pressure, fluids, weight, medications and appointments in one place on your own device, and keeps a list of questions for your next visit. The companion book, *Kidney Navigator* by Michael Moore, a kidney patient and advocate, explains each stage in plain language.

Educational only. This page isn't medical advice, diagnosis or treatment, and MAVTG isn't a healthcare provider. Talk with your nephrologist, primary care doctor or dietitian about your own care.

Sources

1. Centers for Disease Control and Prevention. Chronic Kidney Disease in the United States, 2023 (updated May 2024). cdc.gov/kidney-disease
2. KDIGO 2024 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. Kidney International, 2024.
3. National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). Kidney Failure: Choosing a Treatment That's Right for You. niddk.nih.gov