

What Happens Next?

The clinic is run by Jan Cardwell (Nurse Consultant) and Dr Hardy (Consultant).

You will usually be seen by Jan and if you have any problems in between visits contact her on the number below:

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St Helens and Knowsley
Teaching Hospitals
NHS Trust

Diabetes Kidney Disease

Patient Information Leaflet

This leaflet can be made available
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供
Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.

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What is Diabetic Kidney Disease?

Diabetes can cause kidney damage, where protein appears in the urine. At first only tiny amounts of protein appear in the urine:

Microalbuminuria.

Later, larger amounts of protein appear in the urine –

Nephropathy.

Left untreated, Nephropathy may progress to kidney failure, heart attack or stroke.

How can I prevent kidney failure, heart attack and stroke?

There are 6 important things to do - you must make an informed choice about whether or not to do them:

1. You should work with doctors and nurses to lower your bloodpressure, typically to less than 130 / 80. You may need 3 or more tablets to achieve this blood pressure.
2. If possible, you should take the highest protective dose of a kidney-protecting tablet (e.g. Ramipril or Irbesartan) and if suitable an SGLT-2 inhibitor (e.g. Dapagliflozin).

3. You will be offered a 'Statin' tablet (e.g. Atorvastatin) to maintain your cholesterol(lipid) levels as follows:
4. You should stop smoking (we will help).
5. You may be considered for Aspirin 75mg daily for secondary prevention (e.g. if you've had a heart attack or stroke).
6. You should try to maintain good blood sugar control.

Chronic Kidney Disease (CKD)

If your kidneys work below normal it is called Chronic Kidney Disease (CKD). How far below normal they work is graded 1 (almost normal) to 5 (very poor).

This will be explained to you in clinic and you will be told which stage (1-5) you are at.