



B C R e n a l A g e n c y
An agency of the Provincial Health Services Authority

NEWS RELEASE

December 18, 2003

Lab Initiative a North American First for Screening of Kidney Disease

Vancouver – Thousands of British Columbians with chronic kidney disease will be diagnosed and treated earlier, and given a better chance of staying off dialysis, thanks to an innovative initiative launched by the BC Provincial Renal Agency, the Ministry of Health Services, the B.C. Medical Association and laboratory physicians throughout the province.

All laboratories across BC are phasing in a common set of standards for measuring kidney function for patients who may be at risk for kidney disease. Test results will be automatically reported to family physicians. As well, guidelines will be distributed to family physicians to ensure consistency in the assessment and treatment of high risk patients, including timely referrals to nephrologists (kidney specialists). The initiative is the first of its kind in North America in terms of its breadth.

“No other entire province or American state has embarked on such a systematic approach involving different groups to address the challenge of identifying kidney disease at an early stage,” said Dr. Adeera Levin, Executive Director of the Provincial Renal Agency. “Renal professionals estimate that 145,000 British Columbians have significantly reduced kidney function, but most go untreated as tests and procedures for diagnosis vary.”

If kidney disease is caught early, individuals can be educated about diet and lifestyle modifications that are effective in slowing progression of the disease. As a result, dialysis or transplant can be delayed and in some cases avoided.

The initiative has three major components:

- Labs across the province will use a laboratory test and apply an equation (serum creatinine x age x gender) to estimate kidney function as measured by the glomerular filtration rate, (GFR).
- Labs will automatically report GFR to general practitioners and specialists, making the interpretation of the serum creatinine more meaningful.
- Guidelines will be issued to doctors throughout BC detailing standards for assessment and treatment of patients at a high risk of developing kidney disease.

The BC Provincial Renal Agency (BCPRA), an agency of the Provincial Health Services Authority, plans and coordinates the care of people with kidney disease throughout the province to ensure equitable access to high quality care.

Contact: Gloria Freeborn, BCPRA Communications, 604-780-1290

Available for interviews: Dr. Adeera Levin; patient(s) with kidney disease



BC Renal Agency
An agency of the Provincial Health Services Authority

BACKGROUND

A Growing Epidemic

- An estimated 145,000 British Columbians may suffer from some degree of kidney disease.
- The need for dialysis services is growing at a rate of 8-10 percent per year.
- The cost for dialysis is between \$25,000 - \$45,000 per patient annually.

Risk Factors for Kidney Disease

- High blood pressure
- Diabetes
- Family history of kidney disease
- Known atherosclerotic disease
- Individuals of Asian and South Asian descent

Early symptoms

Note: Many people do not have symptoms until the disease progresses.

- Foamy or bloody urine
- Headaches
- Frequent night time urination
- Puffy eyes or ankles

Symptoms as the disease progresses

- Fatigue
- Nausea
- Puffy eyes or ankles
- Restless legs
- Anorexia
- Polyuria (large volume/increased frequency of urination; seen in diabetes)
- Itching

Kidney Disease and Kidney Failure

As part of the body's waste-removal system, healthy kidneys work primarily to clean the blood of wastes produced through food intake and metabolic function, as well as excess water and acid. Kidneys can fail suddenly due to trauma or critical illness, but more commonly kidney failure is caused by a chronic condition such as diabetes or high blood pressure. There are effective treatments that can help to manage the various stages of kidney disease. If kidney disease is diagnosed and addressed early, certain lifestyle and dietary changes, along with medications, may slow the progression of the disease and prevent complications in other body systems. However, if the kidney function continues to deteriorate to the point of failure, dialysis or transplantation are required for survival.