START TRACKING

NAVIgATE YOUR NUMBERS

A tool for understanding your test results and tracking your goals

As you trek forward, it's important to pay attention to your "numbers," or test results that can tell you about your kidney health. Many personal factors—such as age, gender, and specific health conditions—can affect results and your treatment goals. Your initial results, or baseline, allow you and your doctor to monitor change over a longer period.[1] Ask your doctor what **your** numbers mean for **you**.

Test	What It Is	Why It Matters	How It's Tested	Numbers To Know
Proteinuria *(pro-teen-yur-ee-uh)*	Proteinuria occurs when increased levels of protein leave the bloodstream and spill into the urine.[2] Healthy kidneys allow very little protein to spill into the urine.[2]	The higher your proteinuria, the greater the risk of your disease getting worse (progressing).[3] **The lower your proteinuria, the lower your risk of progression.**[3] Reducing proteinuria for periods of time, or even lowering it to normal levels, may help prevent progression of kidney disease.[3]	A 24-hour urine test measures how many grams of protein spill out in a day (g/d). All urine is collected over a 1-day period. A spot urine test uses a single sample to measure proteinuria. Results are given in grams of protein per gram of creatinine (g/g).	Reducing and maintaining proteinuria **below 1.0 gram per day (<1.0 g/d)** has been recommended as a reasonable treatment target.[3]
eGFR	An estimated glomerular filtration rate (eGFR) gauges how well your kidneys are filtering your blood.[4]	Doctors use filtering rates to determine the "stage" of kidney disease on a scale of 1 to 5.[5] eGFR is also tracked over time to gauge changes in kidney function.[3]	eGFR is calculated using personal factors, including age, gender, and your creatinine level, typically as measured in a blood sample.[3]	In general, eGFR numbers go down as chronic kidney disease gets worse.[3]
Hematuria *(hee-mah-tur-ee-ah)*	Hematuria is the presence of blood in the urine.	In IgA nephropathy, hematuria may occur due to inflammation in the kidney.[4]	Hematuria is tested using a urine sample.[3]	Hematuria means there are red blood cells (RBCs) in your urine. The lab counts and reports the number of RBCs seen under a microscope.[3]
Blood Pressure	Blood pressure (BP) is the pressure of blood pushing against the walls of your arteries. Arteries carry blood from your heart to other parts of your body.	High BP (aka, hypertension) can lead to damage of the blood vessels.[1] Damage to blood vessels in the kidneys weakens their filtration system.[4] This can contribute to proteinuria.[3]	BP is measured using a cuff. Your BP will be checked at your office visits. Your doctor may also ask you to monitor your BP at home.	A BP test shows 2 numbers. Systolic pressure is shown first and diastolic second. Guidelines recommend targeting a systolic BP under 120 for most adults with IgA nephropathy, if tolerable.[3]

Creatinine is a normal waste product from muscles. Serum creatinine is measured using a blood sample and is often used in calculating your eGFR. Urinary creatinine measures the amount of creatinine in a urine sample and helps doctors measure your proteinuria.

Remember, sharing personal targets with your doctor is key, no matter what your numbers are.

A numbers journal to keep your goals in focus

Maintain an active and productive dialogue with your doctor by learning all you can, asking questions, and knowing your numbers. Use copies of this page to jot down your numbers, write out questions, and take notes on what your doctor says.

Proteinuria

▶ Test date: _____ ▶ Your number: _____ ▶ Your target number: _____ ▶ Next test date: _____

Questions/Notes: _____

_____

eGFR

▶ Test date: _____ ▶ Your number: _____ ▶ Your target number: _____ ▶ Next test date: _____

Questions/Notes: _____

_____

Hematuria

▶ Test date: _____ ▶ Your number: _____ ▶ Your target number: _____ ▶ Next test date: _____

Questions/Notes: _____

_____

Blood Pressure

▶ Test date: _____ ▶ Your number: _____ ▶ Your target number: _____ ▶ Next test date: _____

Questions/Notes: _____

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Discover new ways to chart your path forward

References: 1. National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). Managing chronic kidney disease. Accessed September 2022. https://www.niddk.nih.gov/health-information/kidney-disease/chronic-kidney-disease-ckd/managing#eight. **2.** Mayo Clinic. Protein in urine. Accessed September 2022. https://www.mayoclinic.org/symptoms/protein-in-urine/basics/definition/sym-200506562. **3.** Kidney Disease: Improving Global Outcomes (KDIGO) Glomerular Diseases Work Group. KDIGO 2021 clinical practice guideline for the management of glomerular diseases. *Kidney Int.* 2021;100(4S):S1-S276. **4.** National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). IgA nephropathy. Accessed September 2022. https://www.niddk.nih.gov/health-information/kidney-disease/iga-nephropathy. **5.** National Kidney Foundation. Early symptoms of chronic kidney disease. Accessed September 2022. https://www.kidney.org/news/kidneyCare/fall10/EarlyCKDSymptoms.