

Women with chronic kidney disease more likely than men to go undiagnosed

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Woman are at particular risk of their primary care physicians delaying diagnosis of chronic kidney disease (CKD), according to a paper being presented at the American Society of Nephrology's 42nd Annual Meeting and Scientific Exposition in San Diego, California. The findings suggest that educating practitioners about CKD could increase the timely diagnosis of CKD, thereby leading to improvements in care to patients and savings in Medicare dollars.

Maya Rao, MD, of Columbia University, reviewed records from nearly 900 patients at 18 rural, community-based primary care clinics in Oregon, to investigate whether primary care physicians accurately diagnosed CKD in patients with known kidney dysfunction. Chronic kidney disease is estimated to affect up to 19 million adults in the U.S. and is usually diagnosed and treated in the primary care setting. The analysis showed that 52.4 percent of patients found to have CKD did not have a diagnosis in their charts. Females were more likely to be undiagnosed than males, except at the most advanced stages of CKD.

"Chronic kidney disease is very prevalent, uses a great deal of Medicare dollars and needs to be detected early in order to begin an effective treatment plan. Without early diagnosis and treatment, the patient may be more likely to need dialysis and suffer related consequences, such as heart disease," said Dr. Rao. "This study shows that CKD is still being missed by primary care physicians, especially among women patients, and that more education is needed to ultimately improve early detection and diagnosis."

To measure kidney function, primary care doctors typically order a blood test called creatinine, but Dr. Rao says this alone is not a particularly accurate measure of kidney function. The serum creatinine should also be plugged into a formula that gives an estimated kidney filtration rate (called glomerular filtration rate, or eGFR) which is a much more

accurate estimate of kidney function. Women have a lower eGFR than men for the same level of serum creatinine. Thus, the same serum creatinine level that initially appears normal for both a man and a woman can translate into depressed kidney function for the woman, making her at higher risk for undetected kidney disease. In the study, lab reports that automatically included the eGFR calculation did not show a gender disparity in diagnosis of patients - suggesting that including this value on all serum creatinine lab reports could improve diagnosis of CKD in women.

Source: American Society of Nephrology (<u>news</u>: <u>web</u>)



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