



Diabetes Control for Chronic Kidney Disease Prevention

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Kidney Dietitian

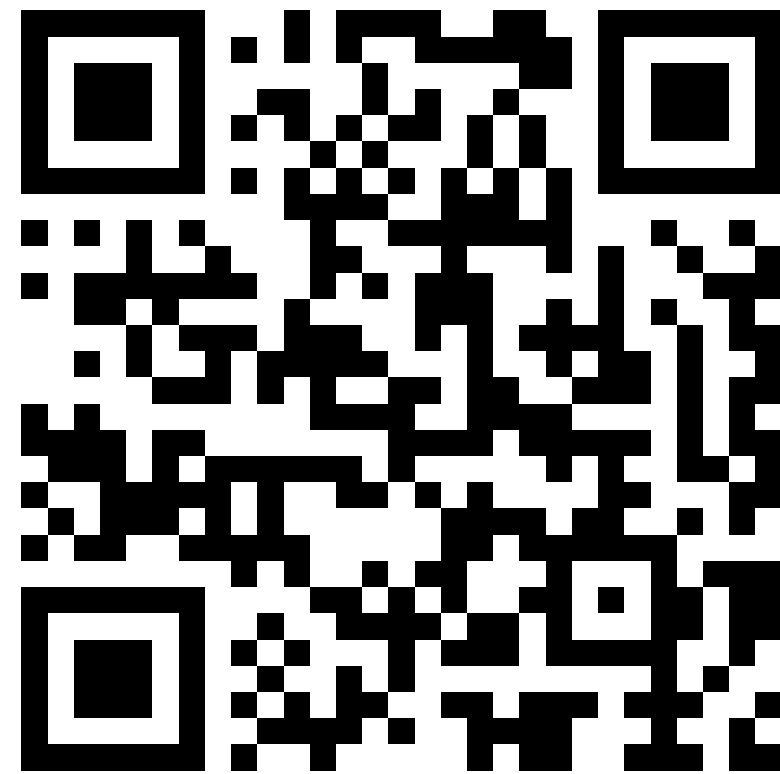
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Pre-Knowledge Check

- Link to start the Evaluation:

<https://www.surveymonkey.com/r/SXQL8G7>



QR Code

Activate the camera on your smart phone and scan this QR code to link to the evaluation



Continuing Education

- To complete the course, the learner must:
 - Watch the 60-minute webinar (live or recorded)
 - Complete evaluation & post-knowledge checks
- Nursing CEs
 - 1.0 Contact hour approved. Quality Insights is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation
- Dietitian CPEs
 - 1.0 CPEU approved through Commission on Dietetic Registration (CDR)



Disclosures

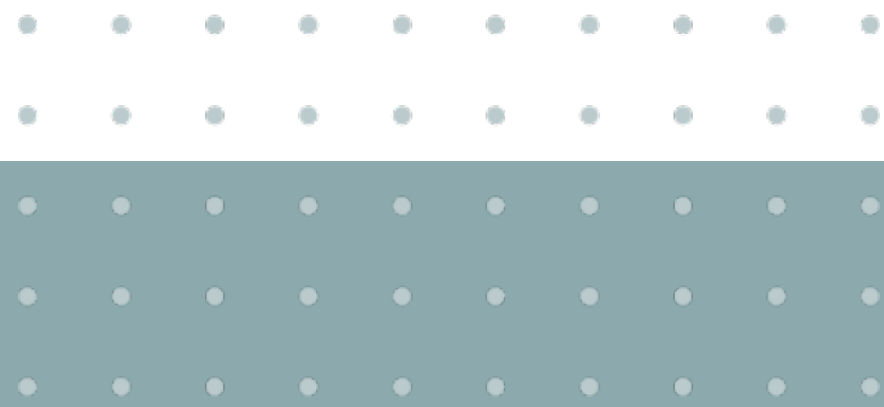
- Jillian Pate and other planners for this educational activity have NO relevant financial relationships with ineligible companies to disclose.
- Expiration for this enduring material:
 - Nursing: 11/14/2026
 - Dietitian: 11/10/2024



Learning Outcomes

- After this course, the learner will:
 - Explain the mechanism of how blood glucose control can prevent CKD progression.
 - Identify the role of a Dietitian and how Medical Nutrition Therapy plays a role in halting CKD progression.
 - Discuss the need for a Certified Renal Dietitian and kidney nutrition.





DIABETES CONTROL FOR CKD PREVENTION





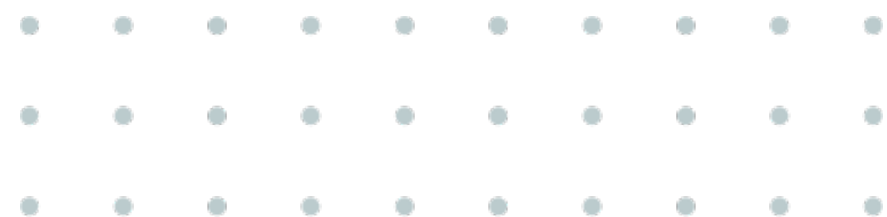
HELLO!

Jillian Pate, MS, RD, CSR, LD
Kidney Dietitian
Renal RD WV, LLC





- 0 1. UNDERSTAND THE MECHANISM OF HOW BLOOD GLUCOSE CONTROL CAN PREVENT CKD PROGRESSION.
- 0 2. IDENTIFY THE ROLE OF A DIETITIAN AND HOW MEDICAL NUTRITION THERAPY PLAYS A ROLE IN HALTING CKD PROGRESSION.
- 0 3. EXPLAIN THE NEED FOR A CERTIFIED RENAL DIETITIAN AND KIDNEY NUTRITION.

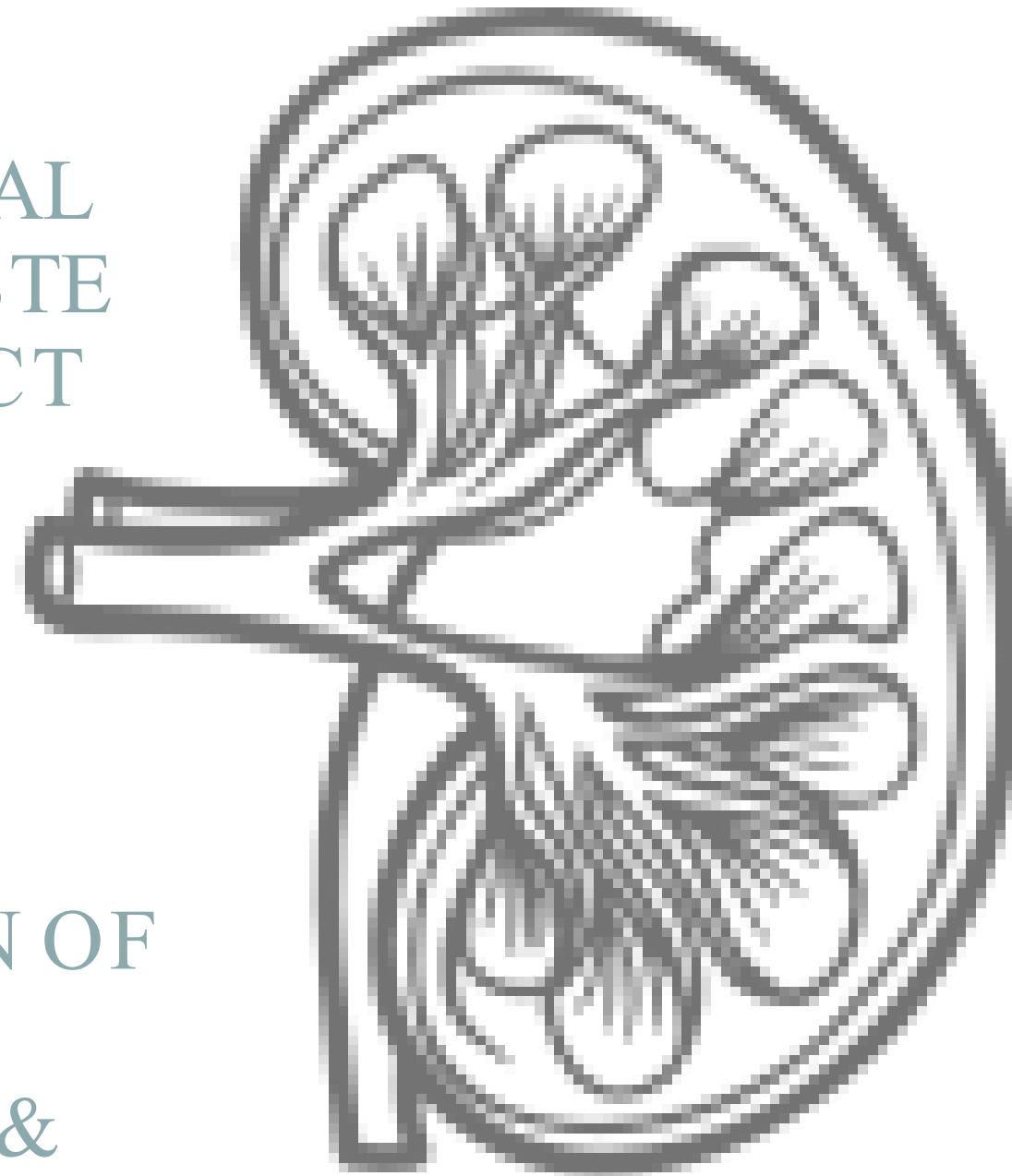


OBJECTIVES

FUNCTION OF THE KIDNEY



REMOVAL
OF WASTE
PRODUCT



REMOVAL OF
EXCESS
FLUIDS

CRITICAL
REGULATION OF
SODIUM,
POTASSIUM &
PROTEIN LEVELS.

CHRONIC KIDNEY DISEASE



DIABETES

POLYCYSTIC
KIDNEY
DISEASE

HYPERTENSION

KIDNEY
STONES



RISING CKD RATES

37 MILLION AMERICANS



LEADING CAUSE OF
CKD IS DIABETES.

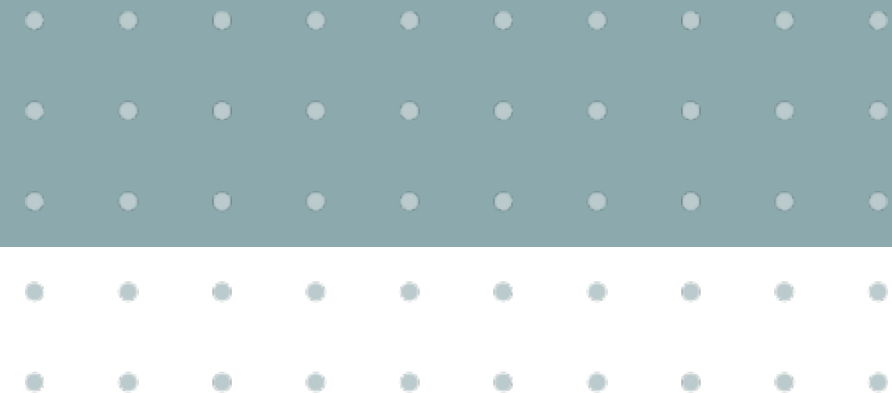
40% OF
INDIVIDUALS WITH
DIABETES HAVE
CKD.



18,400 K

AVERAGE
HOSPITALIZATION
COST FOR CKD.

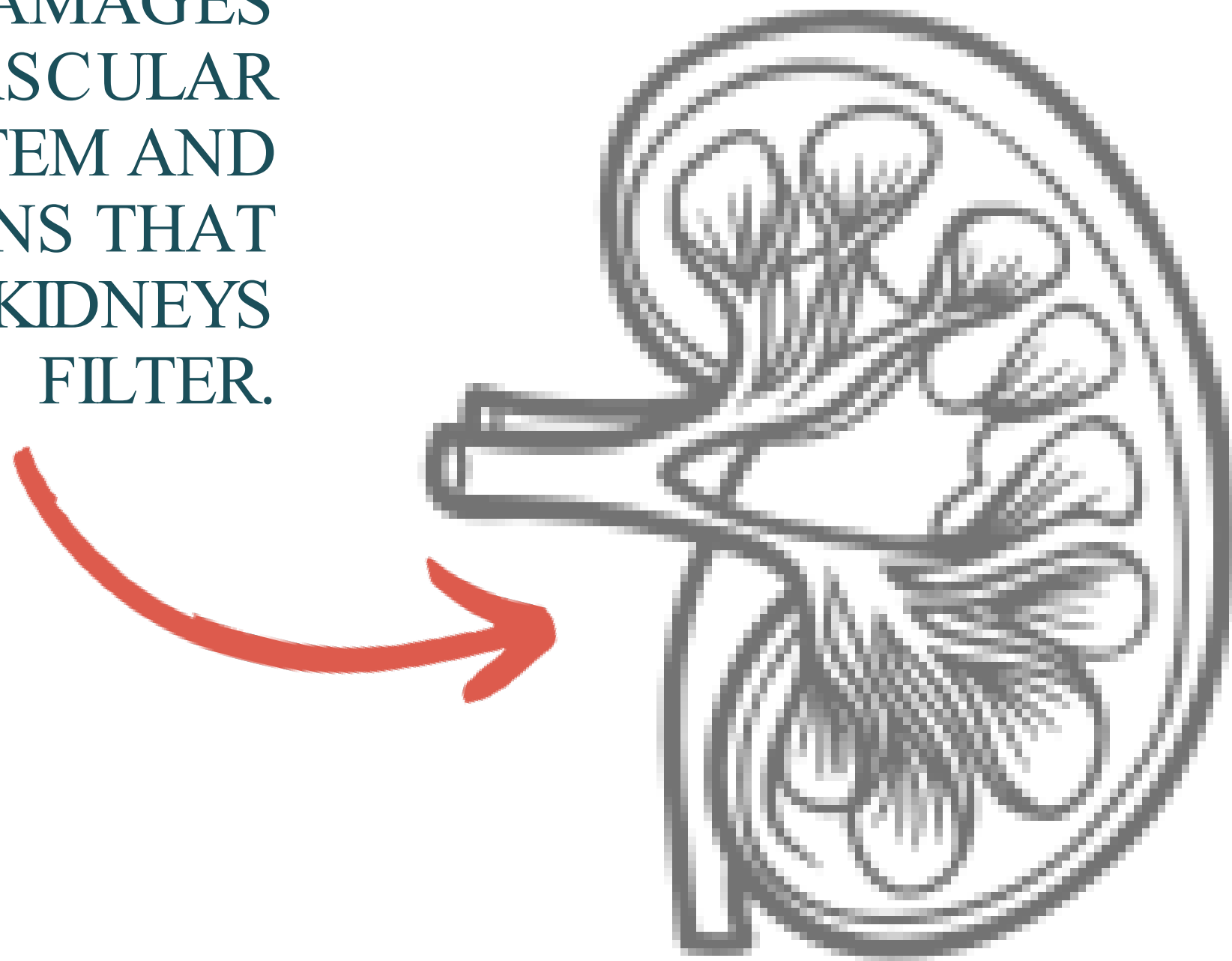
HOW DOES BLOOD GLUCOSE AFFECT YOUR KIDNEY FUNCTION?



HYPERGLYCEMIA



DAMAGES
VASCULAR
SYSTEM AND
NEPHRONS THAT
HELP KIDNEYS
FILTER.



FORCES KIDNEYS
TO WORK
HARDER DUE TO
THE INCREASED
BLOOD FLOW



Type 1 Diabetes

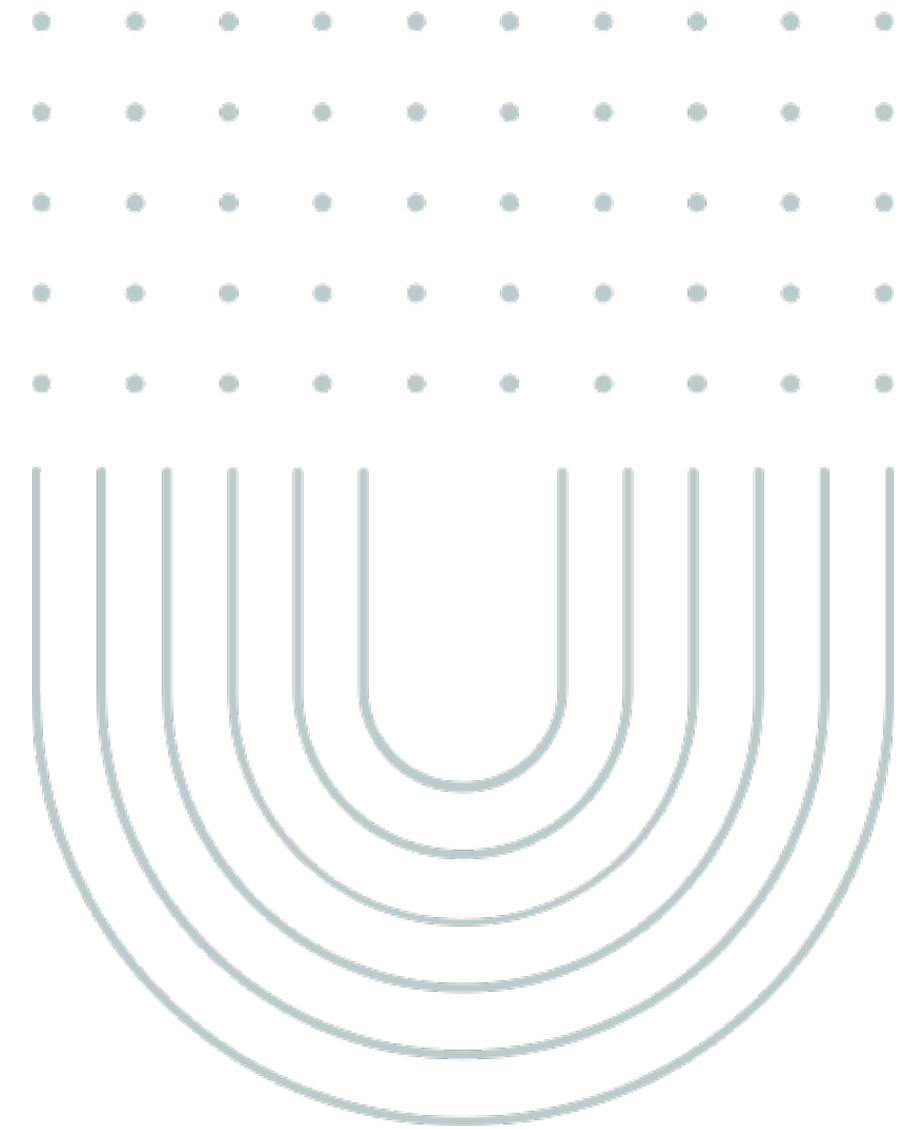
Common for CKD to appear 10 - 15 years after initial onset of diabetes, especially with albuminuria.



Type 2 Diabetes

CKD is often present at the time of diagnosis, most commonly due to a delay in diagnosis.

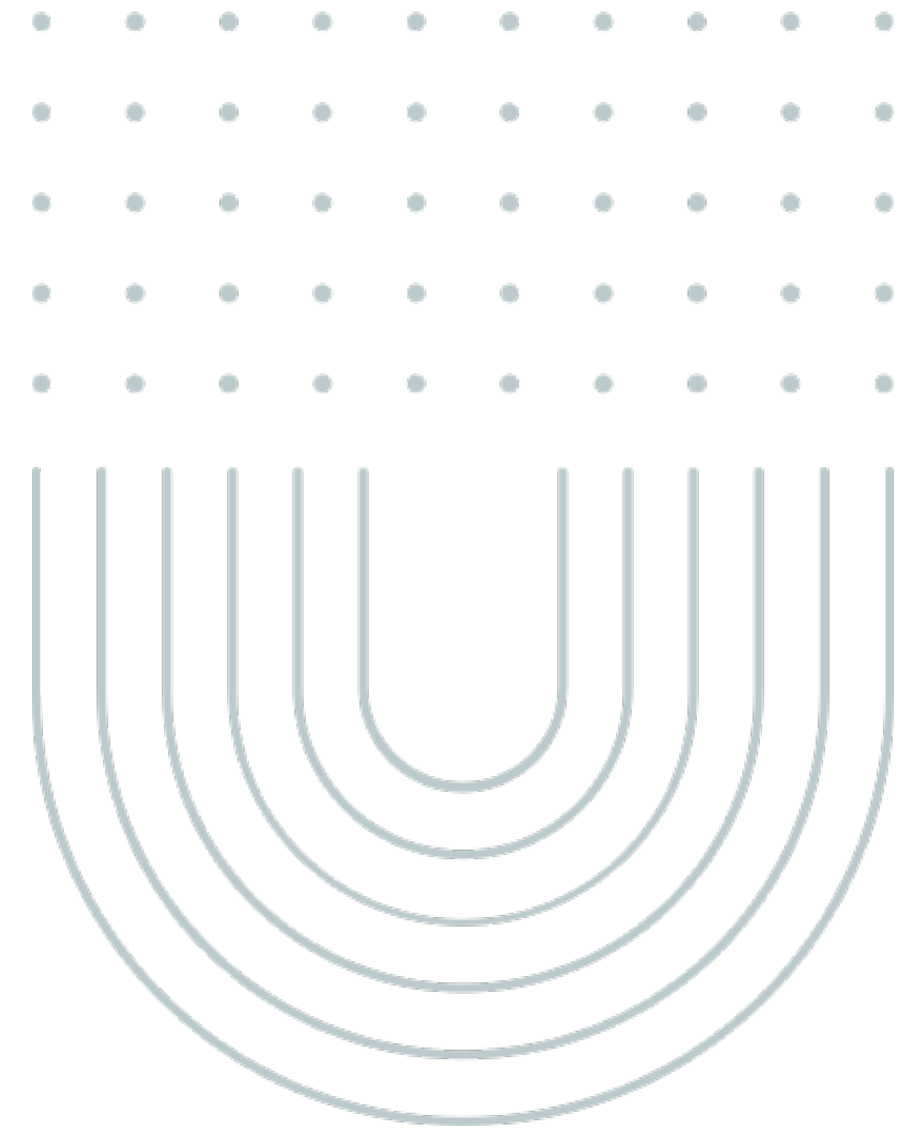
Albuminuria is reported within 10 years after onset.



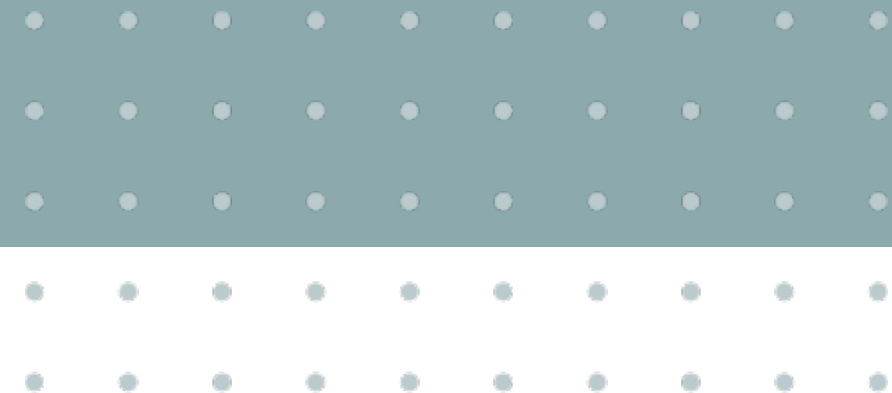


Albuminuria
Protein “spillage” in the
urine.

Most commonly indicates
Kidney disease



IDENTIFYING PATIENTS WITH CHRONIC KIDNEY DISEASE



Symptoms of Kidney Disease



1 Less Energy, Trouble Concentrating.

2 Urinate more often than normal.
Identify blood in urine.
Urine Is foamy.

3 Feet and ankles stay swollen.

4 Poor appetite

5 Muscle cramping.

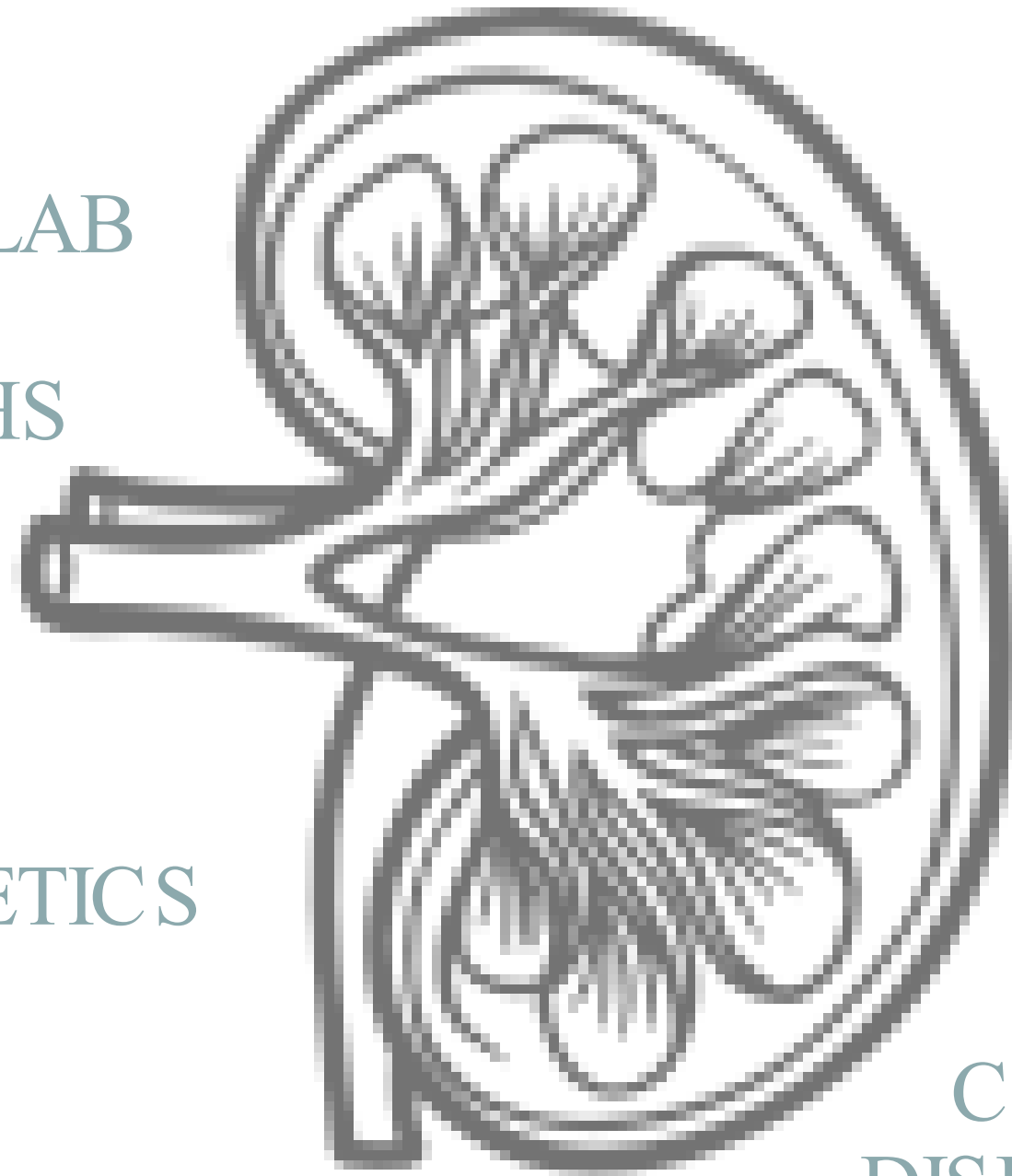


DIAGNOSING



ROUTINE LAB
WORK
>3 MONTHS

LIFESTYLE

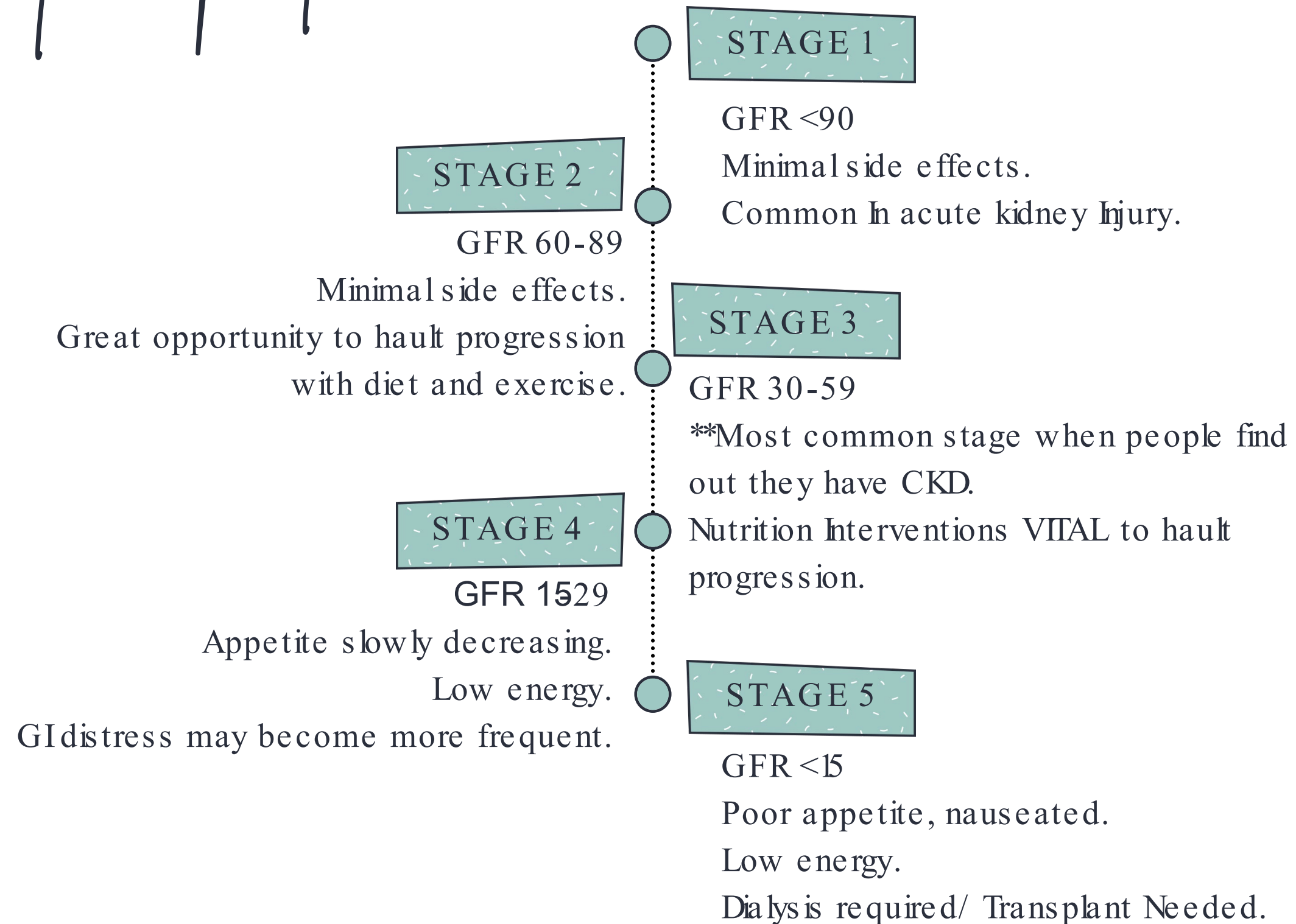


GENETICS

OTHER
CHRONIC
DISEASE DX

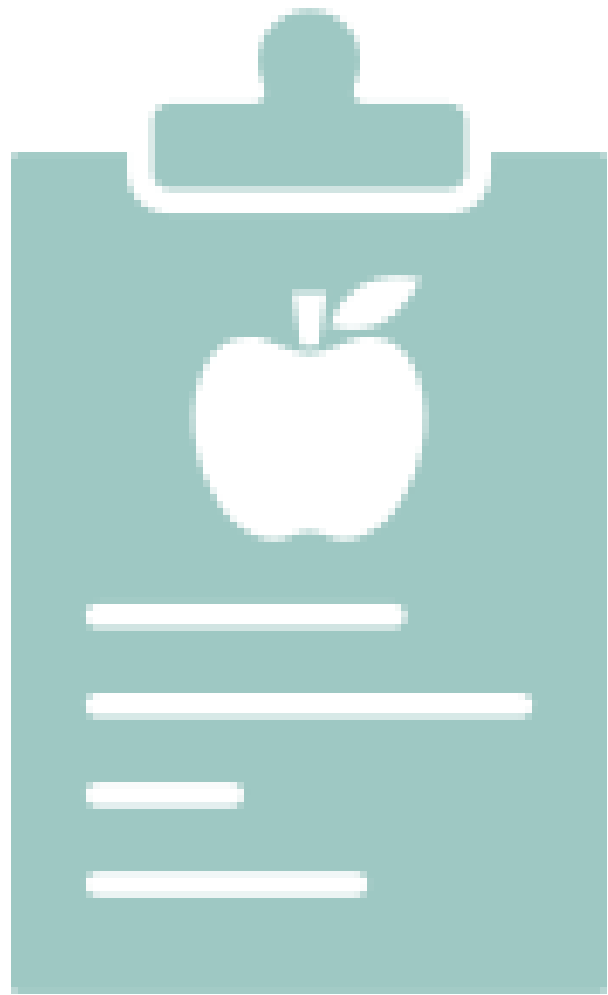
STAGES OF KIDNEY DISEASE:

What to expect...



MEDICAL NUTRITION THERAPY





Assess symptoms.

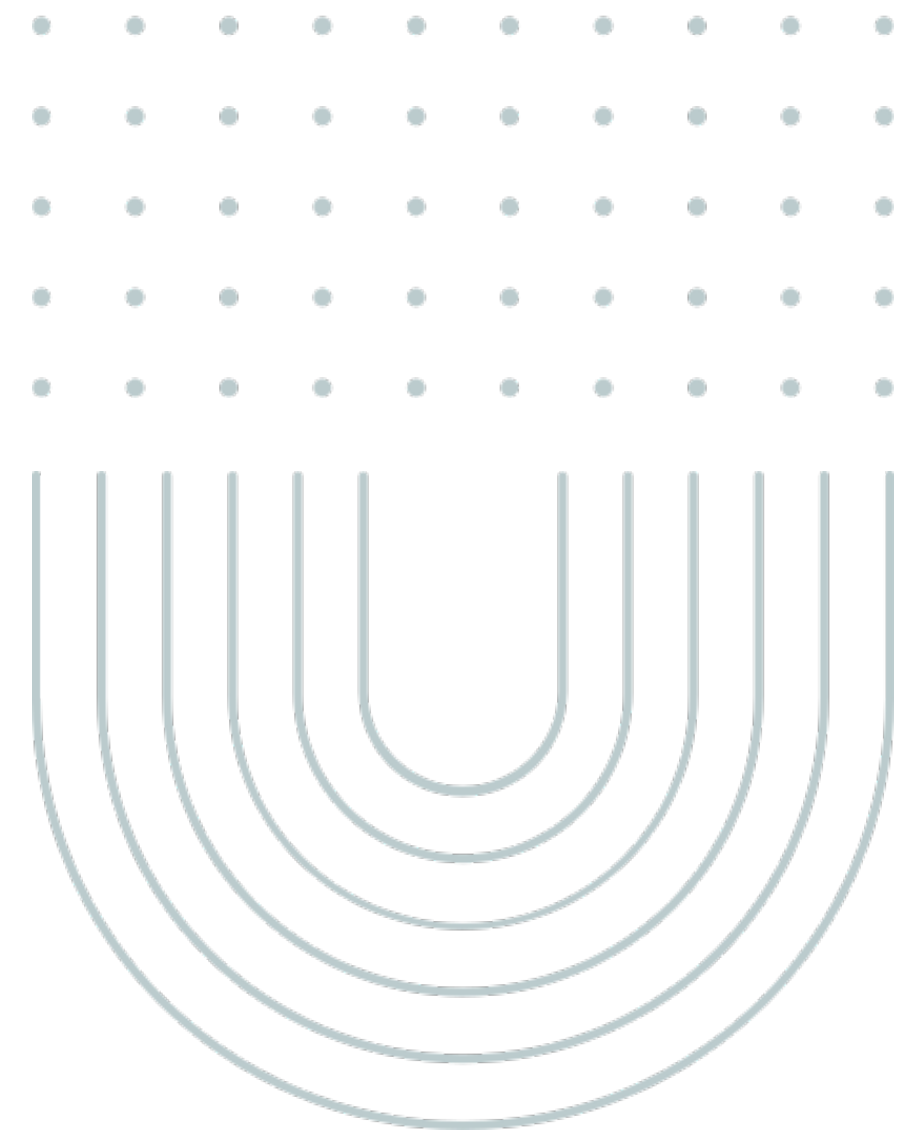
Review lab work.

Monitor blood glucose labs
Recommend a1c to be
checked 2 x year..

Limit sodium intake.

Calculate Individualized
needs for:

- Protein
- Potassium
- Phosphorus
- Fluid



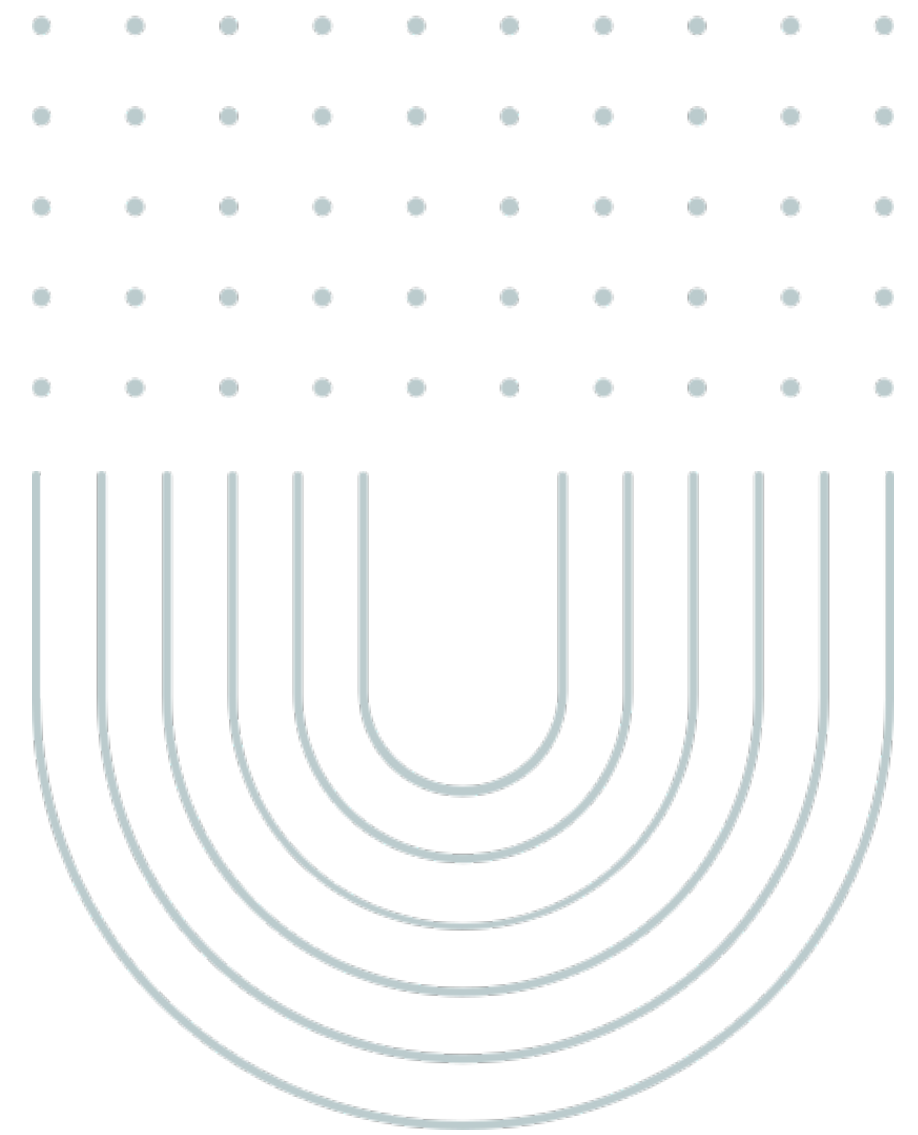
MEDICAL
NUTRITION
THERAPY



Hospital Setting
Dietitian consulted during
stay based on admittance
dx.



Outpatient setting
Dietitian consulted from PCP
for further nutrition
education.



MEDICAL NUTRITION THERAPY

BARRIERS VS SOLUTIONS



“

My doctor doesn't
think a nutrition
consult is needed at
this time.



—— ” ——

I was so concerned
what I could and could
not eat with
Diabetes..so I just
stopped eating.

—— ” ——



"Diabetes
has taken
everything
I love to
eat away
from me."

Don't allow it!



BARRIERS

- NOT ENOUGH RD SUPPORT
- PATIENTS NOT REFERRED
- COST OF SERVICES
- TRANSPORTATION

SOLUTION

- BUILD REPORT WITH PROVIDERS
- CREATE REFERRAL BASED SYSTEM
- MNT COVERAGE FROM INSURANCE PROVIDERS
- TELE HEALTH OPTIONS



HOW A DIETITIAN CAN BENEFIT YOUR INTERDISCIPLINARY TEAM



DIETITIANS ADVOCATE:



BLOOD GLUCOSE
CONTROL



REDUCED
HOSPITALIZATIONS



FOOD INSECURITY
ADDRESSED



IMPROVED MEDICATION
ADHERENCE



DID YOU KNOW?



THERE ARE 111,441 REGISTERED
DIETITIANS

THERE ARE 570 REGISTERED RENAL
DIETITIANS

WEST VIRGINIA HAS TWO RENAL
DIETITANS.



WHAT IS THE PURPOSE OF A RENAL DIETITIAN?



RENAL DIETITIANS



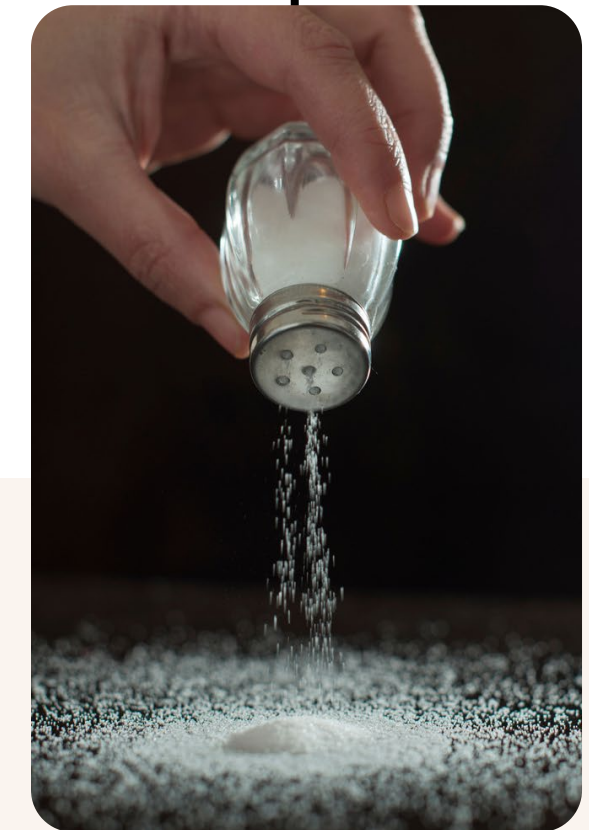
INDIVIDUALIZE GOALS
BASED ON CURRENT
MEDICAL DIAGNOSIS/LAB
RESULTS.



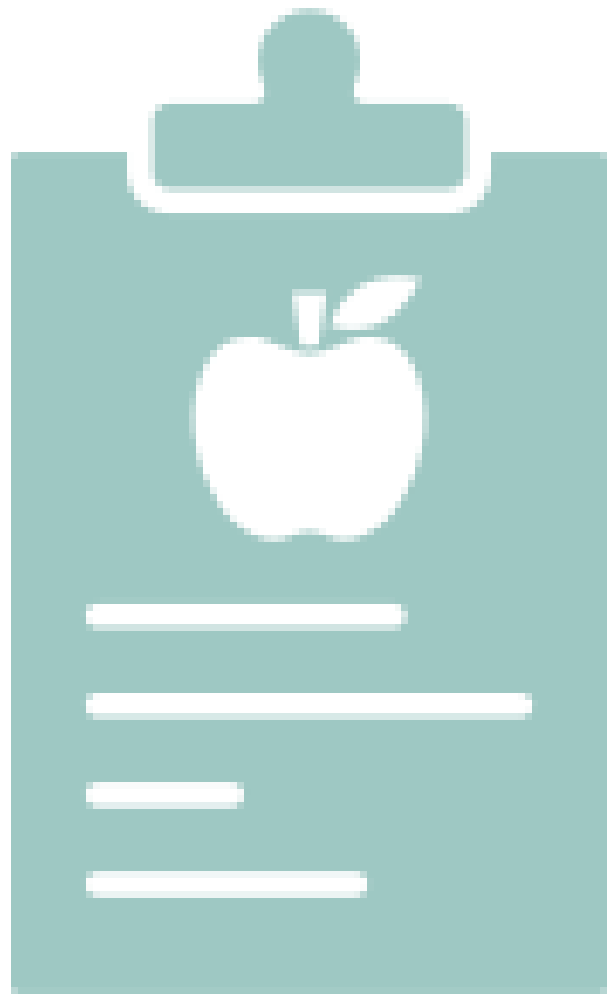
ADDRESS BLOOD
GLUCOSE CONTROL AND
PROVIDE
RECOMMENDATIONS
THAT ARE APPROPRAITE.



. REVIEW FOODS HIGH IN
POTASSIUM,
PHOSPHORUS AND
SODIUM.

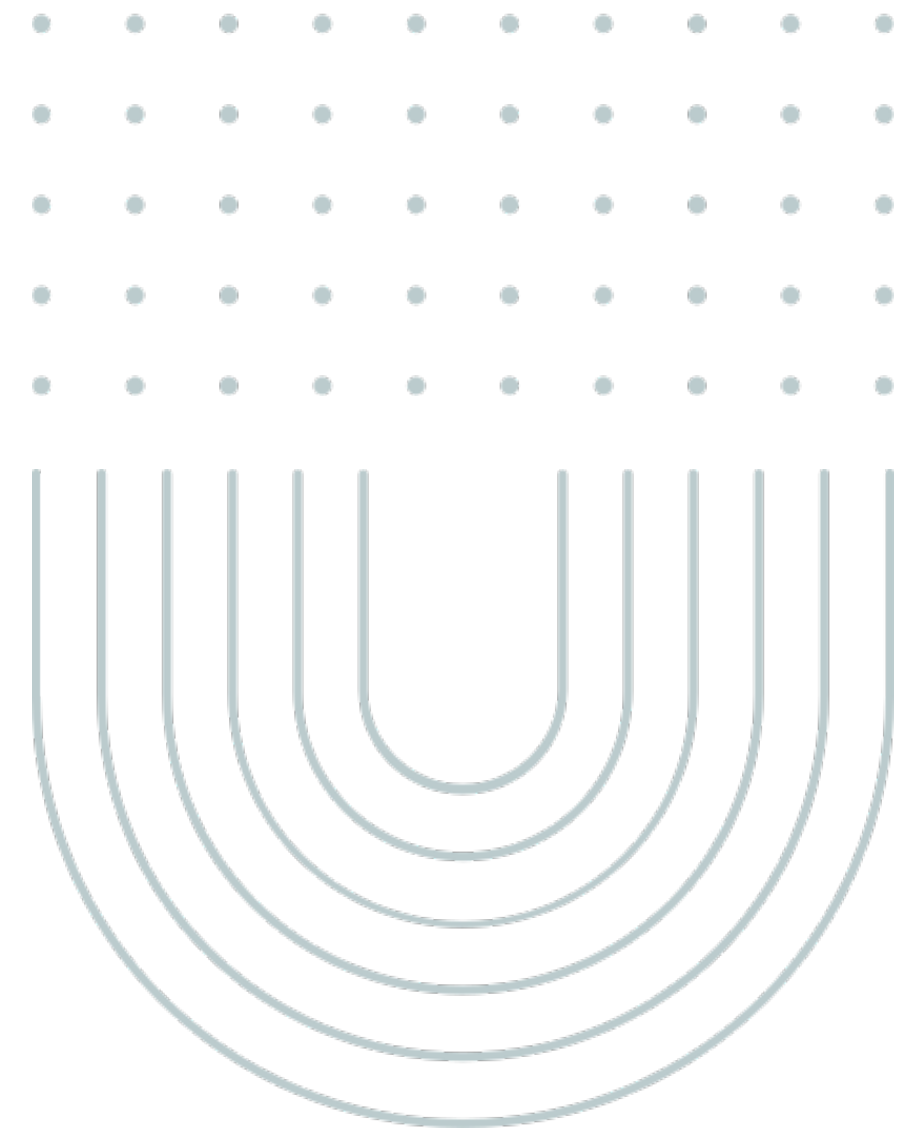


FOCUS ON FLUID/SODIUM
INTAKE. REVIEW
HYPERTENSION.



PROTEIN

- Stabilizes blood sugar
- Promotes wound healing.
- Builds/Maintains muscle, bone, skin and connective tissues.



Medical Nutrition Therapy:

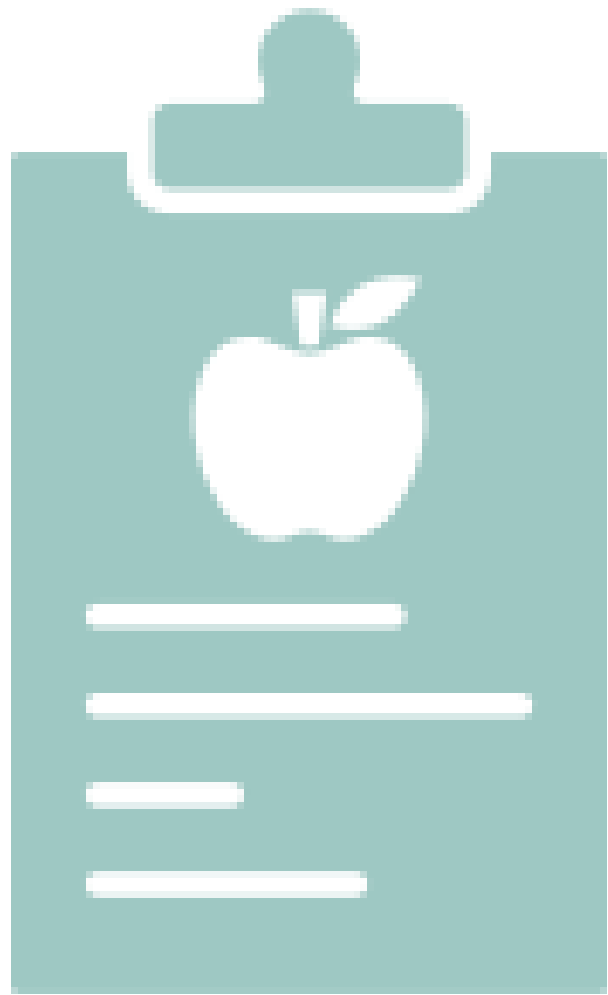
Calculate Individualized needs based on CKD Stage:

0.6 - 0.8gm/kg

0.8 - 1.0gm/kg

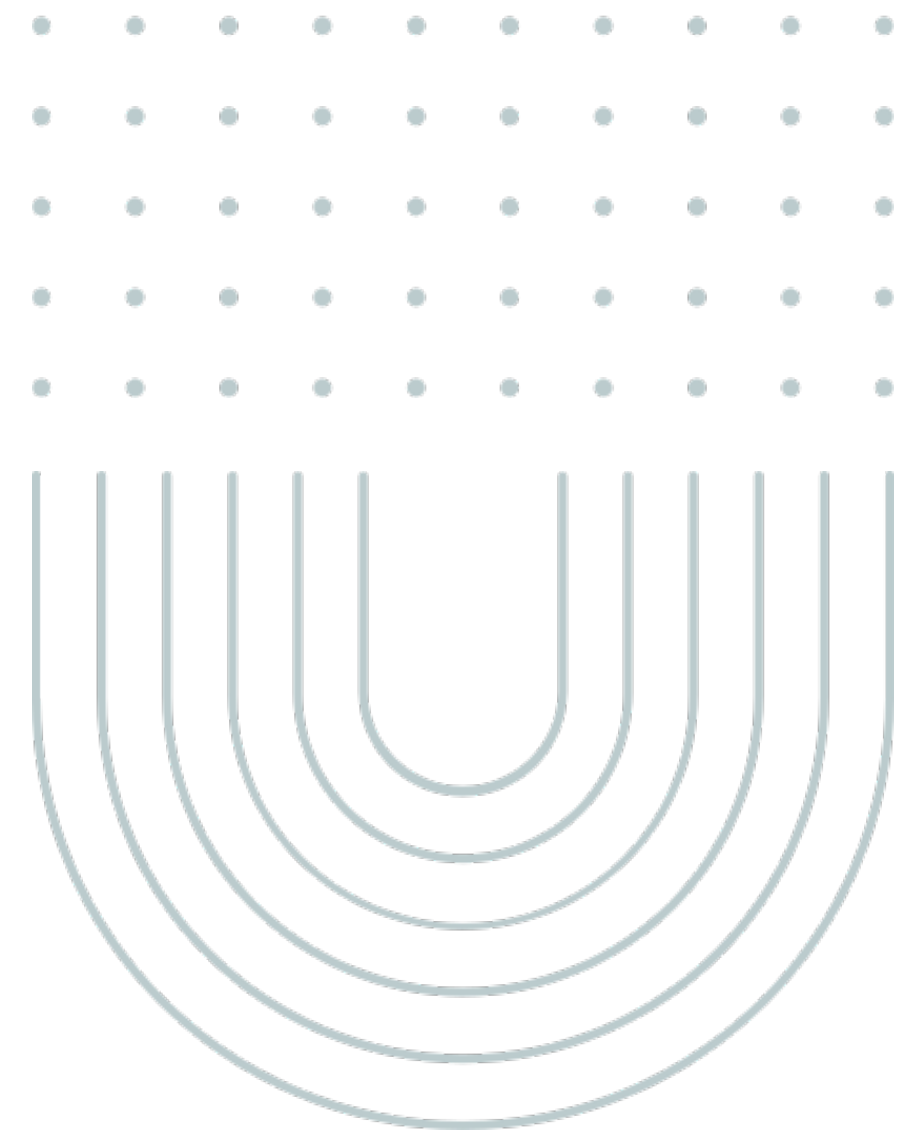
1.2gm/kg

Your body will break down protein into waste that your kidneys will then need to remove from your blood.



POTASSIUM

- Promotes your heart to squeeze blood through the body, promote muscle movement and filter blood through the kidneys.

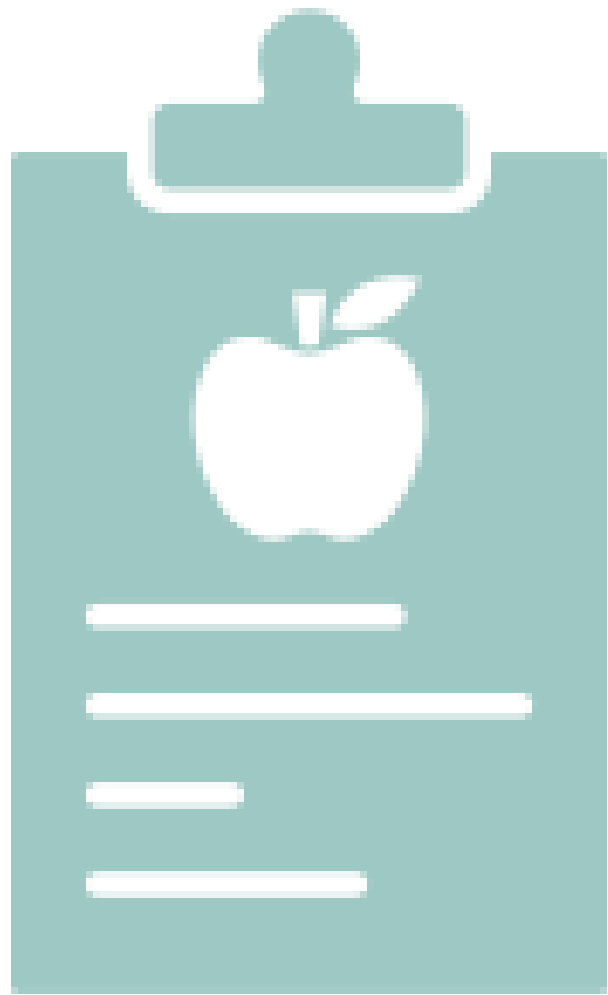


Medical Nutrition Therapy:

Calculated Individualized needs based on lab work.

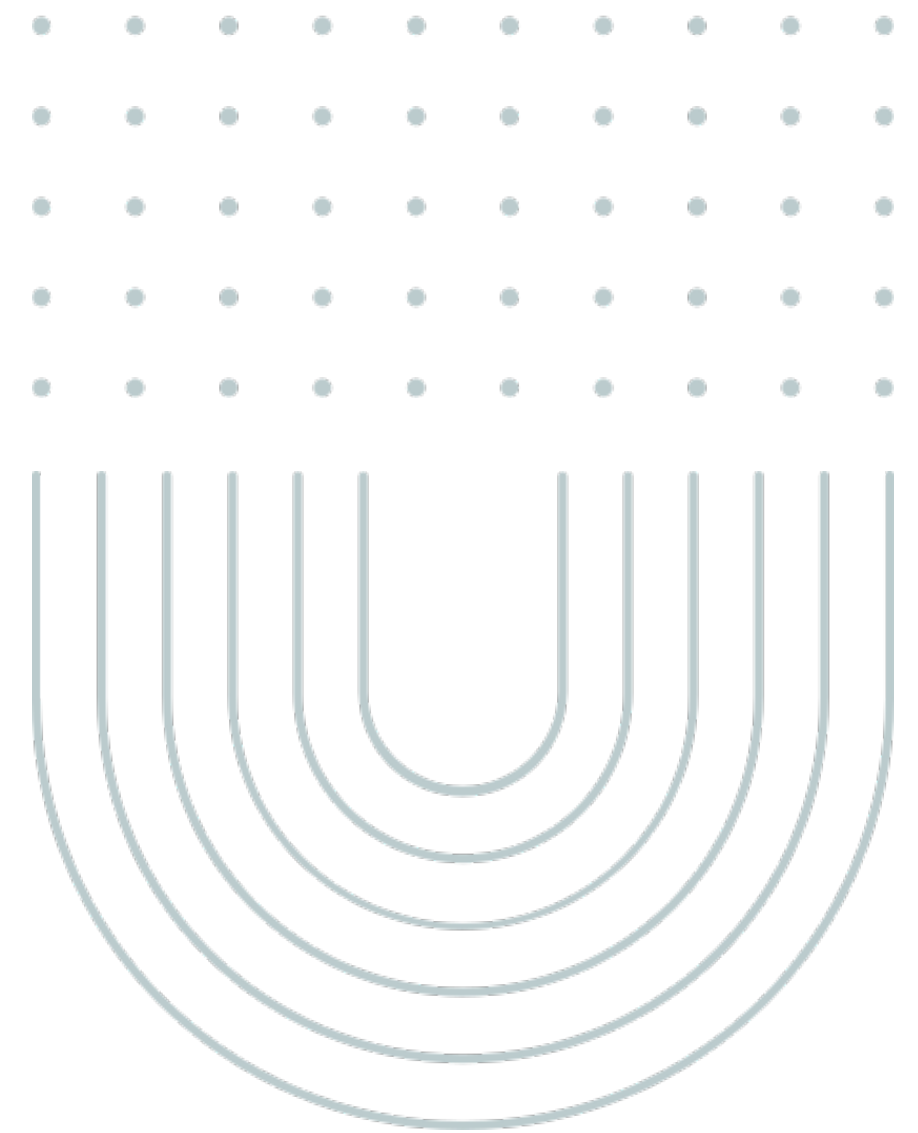
Will provide list of High/Low Potassium Foods.

- Decreased kidney function can make it more challenging for potassium to be removed from the blood.



PHOSPHORUS

- Along with Calcium make up your bone health.
- Found more commonly in dark colas, processed foods, lunch meats, dairy products.



Medical Nutrition Therapy:

Calculated Individualized needs based on lab work.

Will provide list of High/Low Phosphorus Foods.

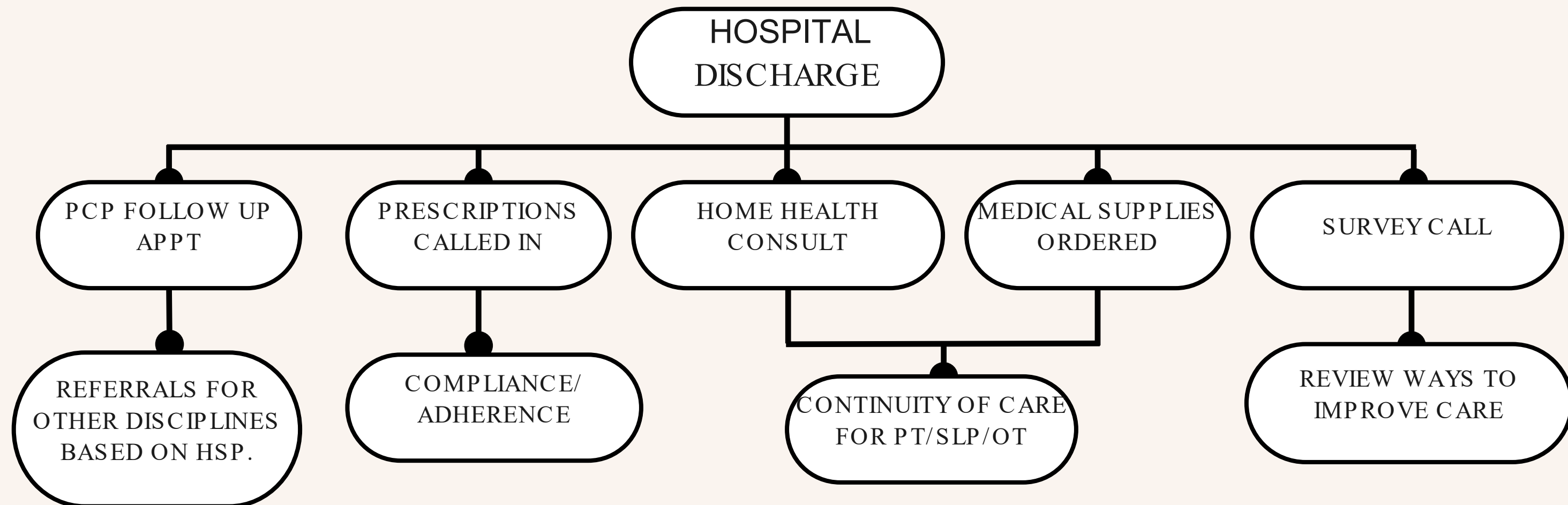
May benefit from a Phosphate Binder.

- Decreased kidney function can make it more challenging for Phosphorus to be removed from the blood.

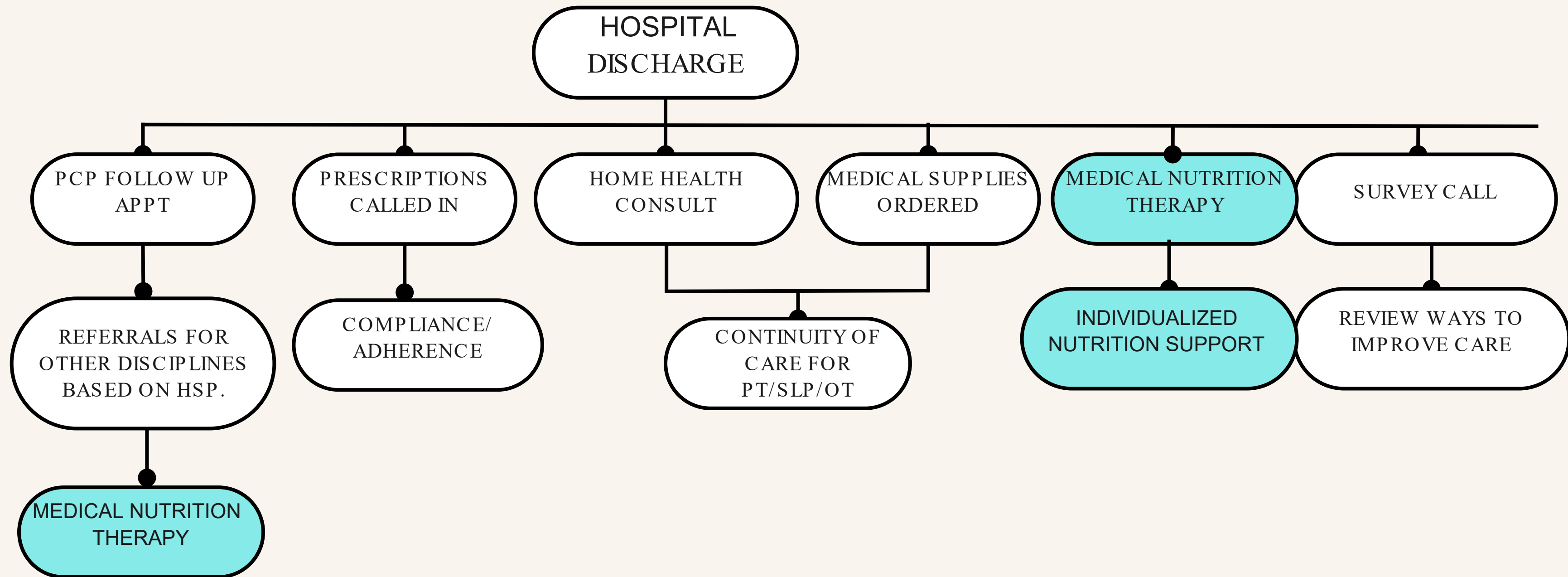
REFERRAL MODEL



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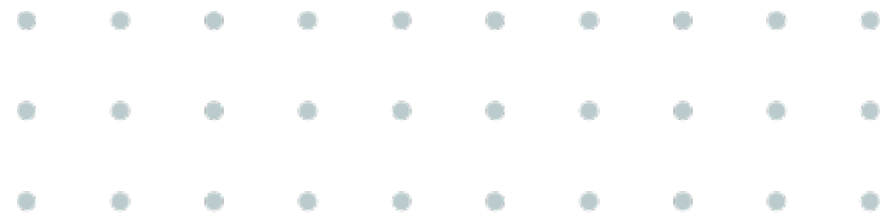


COST OF SERVICES



MEDICARE
MEDICAID
BCBS
UHC
HUMANA
AETNA

INITIAL REFERRAL COVERS:
4- ONE HR SESSIONS/YEAR
2- ONE HR SESSIONS FOR
FOLLOWING YEAR



“STRUCTURED EDUCATION IS CRITICAL TO ENGAGE PEOPLE WITH
DIABETES AND CKD TO SELF-MANAGE THEIR CHRONIC DISEASE STATE.

WE WANT TO PROMOTE MORE DIABETES SELF MANAGEMENT PROGRAMS “

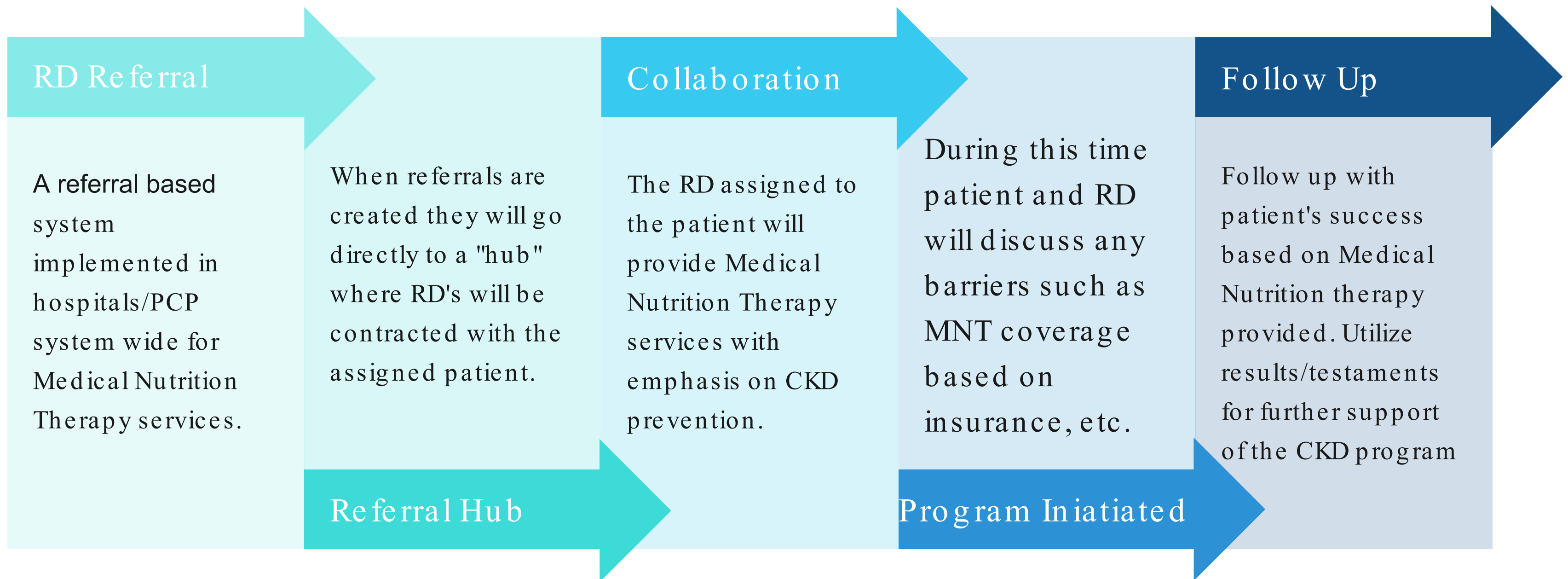
-KDIGO GUIDELINES 2022

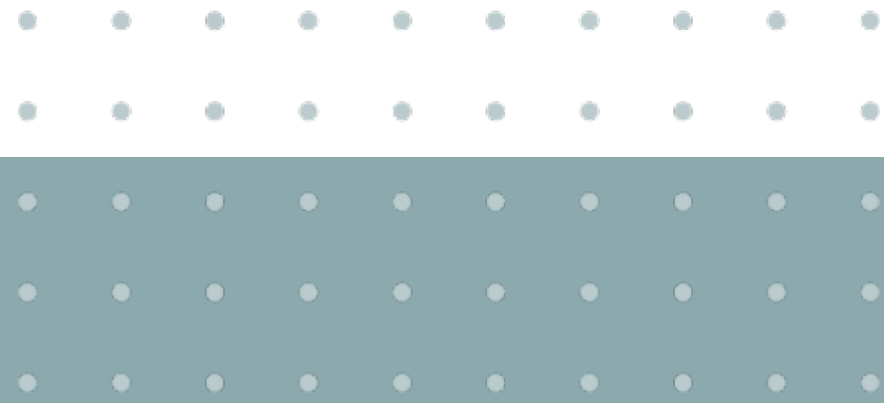
CKD PREVENTION PROGRAM





SIMPLIFY THE WORKFLOW





QUESTIONS?

THANK YOU!



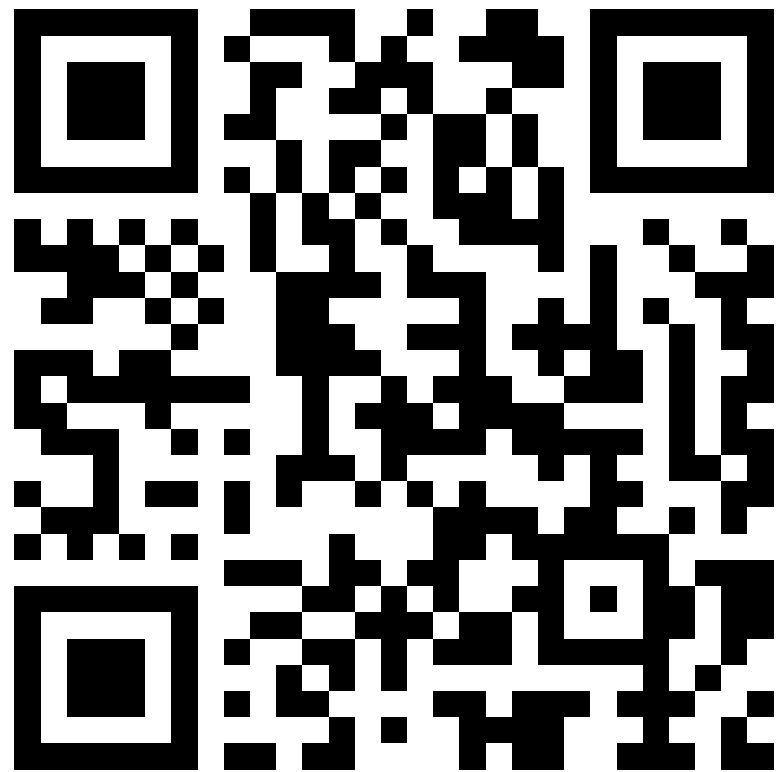
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Evaluation and Post-Knowledge Check

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