

CKD Module Reflection

The CKD modules first explained how to identify and evaluate chronic kidney disease in a patient. It discussed screening people for potential complications for CKD like hypertension, diabetes mellitus type 1 or type 2, family history of kidney problems and cardiovascular disease (CVD). Chronic kidney disease is commonly diagnosed when there is evidence of renal disease and impaired kidney function for more than three months. The two key markers used to screen for CKD are estimated glomerular filtration rate (eGFR) and urine albumin.

Two important things I learned during my read through were that kidney damage is irreversible so it's vital that the etiology is promptly identified. The second was that though diabetes is the primary cause of CKD, a patient suffering from diabetes and CKD should not be assumed to have diabetic renal failure even if the chances of it not being diabetes-related is incredibly slim. This was something I didn't consider as many patients with CKD tend to have diabetic complications as well so I assumed that the diseases went hand in hand.

The modules do a good job of explaining information comprehensively. After discussing how to identify and evaluate patients for CKD, it goes on to explain how to manage patients who have said disease. Various methods can be used to improve and manage conditions, some of which I found interesting were medical interventions that help slow disease progression. Blood pressure management, the use of drugs that inhibit the renin-angiotensin-aldosterone system (RAAS) to reduce urine albumin, and glucose control in diabetics are a few examples.

The benefits of early identification and management of CKD complications help in slowing disease progression and result in an overall better quality of life. Some examples of CKD complications include cardiovascular disease, anemia, mineral and bone abnormalities, malnutrition, and depression. Patients should be referred to a proper health care practitioner, including a nephrologist, due to the complicated nature of CKD. Treatment for this disease demands a multidisciplinary approach. Trends in urine albumin-to-creatinine ratios (UACR) and estimated glomerular filtration rates (eGFR) can be used to evaluate the effectiveness of interventions.

Communicating complex nutrition information during counselling is tricky as a lot of information needs to be given within a short period of time. My favorite part of this read through were the various resources available to improve knowledge and skills in caring for patients with these medical conditions. It's important to build trust and communicate effectively with a patient. This will result in enhancing patient knowledge and adherence to treatment regimens, may minimize diagnostic testing expenses and readmissions to the hospital, will increase patient and clinician satisfaction, and improve clinical outcomes.

However, communicating effectively with patients is a challenge as many things need to be taken into consideration like the patient's ethnicity, culture, their heightened emotions, literacy level and socioeconomic status. As someone who wants to improve her communication skills, reading this section of the module helped me learn various techniques I can use for example Ask-

Tell-Ask. The framework encourages communication by assessing what the patient understands (Ask) before providing information (Tell) and finally verifying (Ask) for comprehension of what has been said. This clarifies a patient's comprehension and point of view. The other technique was recognizing and responding to emotion using NURSE. When faced with emotional patients, clinician should,

- Name the emotion
- Understand the emotion
- **Respect** the patient
- **Support** the patient
- **Explore** the emotion further

Recognizing and accepting emotional responses assists patients in gathering their thoughts and adjusting to better manage critical news. This also helps solidify the clinician-client relationship.

Overall, the CKD modules were very informative, comprehensive, and addressed pretty much everything regarding identification and evaluation of CKD, the interventions and management, and different resources that could be used to enhance knowledge and skills when dealing with clients with various disease complications. I didn't have a lot of trouble going through the information that was provided and learned a lot of things I didn't know about previously. One part of the material I struggled with were the various equations they used to assess kidney function, creatinine assays and how that affected dosage adjustment. Audio and visual aids helps me better understand complex topics which is probably why I found it a bit hard to understand this section.