

Southern Indiana Nephrology and Hypertension

Anemia and Chronic Kidney Disease

Anemia is a common problem in which there are not enough healthy red blood cells to provide the body with the oxygen that it needs. Anemia can cause many **symptoms**, such as:

Looking pale	Feeling tired, weak	Restless legs
Feeling of coldness	Lightheadedness	Decreased exercise tolerance
Shortness of breath	Chest pain	Heart enlargement
Irregular heart beats	Difficulty thinking	Impaired immune system
Decreased Libido	Headaches	ringing in ears

The **diagnosis** of anemia is made by a simple blood test called a hemoglobin, which measures your red blood cells. If this is low, it means that you have anemia. Blood work, including kidney function tests, can sometimes show the cause. The stool should also be checked to be sure there is no blood loss from the colon or intestine. If blood loss is found, further testing, such as a colonoscopy, may be required.

There are many **causes** of anemia, including:

Blood loss	Kidney disease	Inherited problems of the blood cells
Iron deficiency	B12 deficiency	Folate deficiency

If **kidney disease** is causing the anemia, the kidneys will release less of the hormone called **erythropoietin**, which tells the body to make blood, and anemia can develop.

Treatment of anemia may include:

Iron tablets

Over-the-counter iron sulfate 2 pills twice a day

Prescription iron pills such as

Niferex 1 pill twice a day

Ferrous fumarate 1 pill twice a day

Intravenous (IV) iron

Venofer: given over 1 hour, once a week, for five weeks at the hospital

Feraheme: given in office, 2 doses at least 3 days apart

B12 injections

Folate pills

Erythropoietin (hormone) replacement

Aranesp given as injection, weekly to monthly

Procrit given as injection, usually weekly

Anemia requires frequent monitoring, and often many different types of treatment, but can be successfully treated!