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# The Role of Allied Health Professionals in Kidney Disease Screening and Management



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**C**hronic kidney disease (CKD) and end-stage renal disease (ESRD) are significant public health problems in the United States and a major source of suffering and poor quality of life for those afflicted. Nearly 25% of the Medicare budget is used to treat people with CKD, ESRD, and related comorbidities. To get a better sense of ways in which allied health professionals can work with physicians to better manage CKD in their practice, *Medical Economics* sat down with Michael Spigler, Vice President of Patient Services and Kidney Disease Education for the American Kidney Fund (AKF), a nonprofit organization that oversees a spectrum of programs and services for patients with kidney disease. AKF works closely with American Medical Technologists (AMT), a certifying agency and membership society for allied health professionals.

#### ***Medical Economics:* Why is CKD described as a national burden?**

**Michael Spigler:** For starters, there are at least 31 million Americans who have CKD. CKD results in detriments to patients' quality of life and can also be a significant financial burden.

CKD is characterized by a significant decline in how well your kidneys are working. There are both early stages of CKD as well as end-stage renal disease or kidney failure. When an individual progresses to that point, they usually need either dialysis or a kidney transplant.

#### ***Medical Economics:* Who is at risk of developing CKD, and how can healthcare professionals identify appropriate patients for preventive care?**

**Michael Spigler:** When you're talking about risk factors, it's important to recognize that most people with CKD don't know that they have it. Approximately 9 out of 10 individuals with CKD are estimated to not know that they have the disease. Unfortunately, there are usually no symptoms with CKD until it's too late.

That said, there are clear risk factors that may put someone in danger of kidney failure. Diabetes is the cause of nearly half of all kidney failure cases in the United States. Hypertension, or high blood pressure, is another leading risk factor, causing about 25% of all cases of kidney failure.

Having a family history of CKD or kidney failure may also put patients at increased risk, as can being a racial or ethnic minority such as a Hispanic, African American, or Asian Pacific Islander.

Of course, as you get older, your kidneys age and don't work as well, so individuals older than age 60 years also are at higher risk for developing kidney disease.

#### ***Medical Economics:* What is the role of the allied health professional in screening patients with CKD?**

**Michael Spigler:** They have a really important role. Often, allied health professionals such as medical assistants are spending more time with patients than prescribers. They're seeing the patient first, and sometimes last, at an appointment. Medical assistants can help to identify patients with and at risk of developing CKD, and can consult with the physician or the prescriber about ways to help patients change their lifestyle to include healthier behaviors.

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For instance, the allied health professional may be able to identify the patient with diabetes who is African American and has a brother on dialysis as someone at high risk of kidney disease on the front end, and then be that final reminder to quit smoking or eat healthier foods on the way out of the practice setting.

When patients go to their doctor, it's often allied health professionals who are taking their blood pressure and asking about any warning signs and symptoms. They're the ones asking about a possible history of diabetes during the medical review. These things can all help paint a picture of a patient at risk of kidney disease.

There are also a variety of laboratory tests that allied health professionals such as medical technologists may be involved in. The gold standard for seeing how well someone's kidneys are working is a blood test called creatinine, which is used to calculate a patient's estimated glomerular filtration rate (eGFR). This result gives you the best idea of how well a patient's kidneys are working.

A urine test that shows possible protein in the urine—a sign that the kidneys are not working well—can also help identify patients with early-stage kidney disease.

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**Medical Economics:** In a physician's practice, what is the role of a medical assistant in educating patients and helping them manage their CKD?

**Michael Spigler:** If you think about the main causes of kidney failure—diabetes and hypertension—assisting the patients to manage those conditions is really important, and that means adherence to medications that they may be taking, following whatever regimen they may have been given, and making sure they're coming to their doctor's appointments.

The American Kidney Fund (AKF) recently published a study in which we asked patients, "Who do you feel most comfortable with talking about your health, your medical tests, and things that you're doing at home to adhere to your treatment regimen?" We found that many patients actually prefer talking to their allied health professionals—their medical assistants, their nurses, their dialysis techs—as opposed to their physician or their prescriber.

The main reason for that is they felt like they had much more time to speak to their allied health professional than their prescriber. That's in part why allied health professionals play such an important role in educating patients about kidney disease.

*Allied health professionals play such an important role in educating patients about kidney disease.*

**Medical Economics:** With approximately 90% of individuals with CKD being unaware of their condition, what is being done to raise awareness and promote earlier intervention to offset the cost burden of CKD?

**Michael Spigler:** American Medical Technologists (AMT) and the AKF have joined forces to help change behaviors in order to reduce the incidence of CKD and ESRD.

AKF conducts free health screenings and Kidney Action Days across the country to identify individuals at risk of developing CKD. A number of AMT's allied health professional members volunteer at these events, helping to screen and educate the public.

AKF also has a kidney health educator program that provides peer-to-peer education. This program brings education into the local community, place of worship, or workplace. Approximately 25% of our kidney health educators are AMT members.

A number of AMT members also participate in annual fundraising initiatives for AKF through events such as KIDNEYNATION and other grassroots events that help individuals pay for ongoing CKD expenses not covered by insurance.

**Medical Economics:** How else can allied health professionals assist physicians and the public in meeting the CKD national objectives?

**Michael Spigler:** One thing that AMT and AKF are currently collaborating on is an educational pamphlet that focuses on some of the key information for allied health professionals to talk about with their patients.

This pamphlet, which is available through the AMT national office (link below), can be used during conversations with patients, family members, or even friends to emphasize the serious nature of kidney disease and serve as a useful takeaway tool when the patient leaves the office. It's important to catch patients in that salient moment when they are hearing and thinking about kidney disease so that the key messages click in their heads.

For more information about AMT and AKF's partnership or to download the pamphlet, please visit <http://www.americanmedtech.org/AboutUs/AmericanKidneyFundPartnership.aspx>.