



KNOW YOUR KIDNEY AND HEART HEALTH NUMBERS

These are some of the most common health numbers used to check your heart and kidney health. Ask your care team about these numbers, write them down, and track how they change over time. For each one, it helps to understand what it measures, why it matters, and your target range.



Blood pressure:

- **What it measures:** The force of blood pushing against the walls of your blood vessels. The top number (systolic) is the pressure when your heart beats. The bottom number (diastolic) is the pressure between beats.
- **Why it matters:** High pressure slowly damages your kidneys, heart, and blood vessels over years, usually without symptoms.
- **Target range:** For most people with kidney disease, the goal is usually below 130/80 mm Hg. Some people have a lower or higher goal, so ask what's right for you.



eGFR (estimated glomerular filtration rate):

- **What it measures:** A blood test that estimates how well your kidneys are filtering waste from your blood.
- **Why it matters:** eGFR is the main way to tell how much kidney function you have and whether it is changing over time.
- **Target range:** A higher number is generally better; 60 or above is in the normal range for many adults. Lower numbers, or numbers that keep going down, are a sign of kidney disease. eGFR naturally decreases over time – there is not much that can be done to increase it. So, the goal is to slow down how fast it goes down rather than try to make it go up.



uACR (urine albumin-creatinine ratio):

- **What it measures:** A urine test for a protein called albumin leaking into your urine (pee)
- **Why it matters:** Albumin in the urine is one of the earliest warning signs of kidney damage and predicts a higher risk of cardiovascular disease.
- **Target range:** A lower number is better, especially under 30 mg/g. Higher numbers mean more kidney damage and a higher risk of cardiovascular disease. Unlike eGFR, uACR can be treated, with a goal of reducing it to below 30 if possible.



A1C:

- **What it measures:** A blood test showing your average blood sugar over the past 2-3 months (reported as a percentage)
- **Why it matters:** High blood sugar is a leading cause of both kidney disease and heart disease. Keeping it managed protects both.
- **Target range:** For most adults with diabetes and kidney disease, the goal is usually less than 7%. Some people may have a lower goal (less than 6.5%) while others may have a higher goal (less than 8%), so ask what's right for you.



LDL cholesterol (“bad” cholesterol):

- **What it measures:** This type of cholesterol builds up inside the walls of your blood vessels (also known as “plaque”).
- **Why it matters:** Lowering LDL cholesterol lowers your risk for heart attacks and strokes, which are both more common when you have kidney disease.
- **Target range:** A lower number is generally better. For many adults with kidney disease, the usual goal is below 100 mg/dL. Some people at higher risk for heart disease may have a lower goal: below 55 mg/dL. The right goal and medicines for you depend on your overall health and heart risk, so be sure to ask your care team.



Triglycerides (blood fats):

- **What it measures:** A type of fat in your blood, measured with your cholesterol panel.
- **Why it matters:** High levels are common in kidney disease and add to heart and blood vessel risk. Very high levels can also damage the pancreas.
- **Target range:** Generally under 150 mg/dL. Diet, activity, limiting alcohol and sugary drinks, and weight loss (if appropriate) will all help lower it.

Tips

- Keep a simple log (paper or phone) with the date and each result.
- Ask your care team what goals are most appropriate for you and write that down for your reference later.
- Track your numbers over time – are they improving, worsening, or staying the same? If they are worsening, ask your care team what you can do to help.



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