

# Managing diabetes with end-stage kidney disease

If you have end-stage kidney disease (ESKD), managing your diabetes could be different from how you did it before. When you start dialysis, your care team may make changes to your blood sugar goals, diet, and medications to help you feel your best.

## Controlling your blood sugar

Keeping your blood sugar levels within range is usually done with diet, exercise, and, if needed, medication like insulin shots or anti-hyperglycemic pills. Your care team will teach you how to monitor your blood sugar levels every day using a blood glucose meter.

Managing your blood sugar can protect you against complications from diabetes, including:

- Eye disease or blindness (retinopathy)
- Nerve damage in the feet and hands that can cause pain and numbness (neuropathy)
- Poor blood flow to the feet and legs that can lead to ulcers and amputation
- Stroke
- Heart disease and heart attacks

### Testing your blood sugar

Your provider will do regular A1C tests, which measure your average blood sugar over the past 2–3 months. It helps them understand how well your diabetes treatment plan is working.

### Understanding low blood sugar

While high blood sugar is dangerous, low blood sugar (called hypoglycemia) can be dangerous as well. Your risk of low blood sugar is higher on dialysis and in the end stages of chronic kidney disease, especially if you have trouble eating, are sick to your stomach, or have other digestive problems. Your care team may need to set new blood sugar goals if you're having trouble with low blood sugar.

## Creating a nutrition plan

A healthy diet for people with ESKD or those on dialysis includes:

- Healthy fruits and vegetables
- Limited sodium and phosphorus
- Adequate protein
- Potassium and carbohydrate amounts tailored to your individual needs

Your care team will work with you to create a diet plan to manage both your diabetes and ESKD.

## Tip

You can still get a kidney transplant if you have diabetes. Once you get a new kidney, your care team may adjust your diabetes medications because your new kidney will break down insulin more effectively, you may eat more, and the anti-rejection medications could increase your blood sugar.



## Changes to your medications

Your care team may make changes to your medications as your kidney function changes to keep you feeling your best.

Some medications that may need to be stopped due to low kidney function include:

- Metformin
- Glyburide
- Any medications in the SGLT2 inhibitor class (e.g., empagliflozin, canagliflozin, dapagliflozin)
- Some medications in the GLP-1 receptor agonist class (e.g., exenatide and lixisenatide)



## Managing other conditions

Managing other health conditions along with your diabetes and ESKD can help you stay healthy and feel your best. These may include:

### Heart disease

Heart and blood vessel problems are common in people with both diabetes and ESKD. Managing your blood pressure and cholesterol levels can keep your heart healthy. If they are too high, you might need medication to keep them under control.

### Anemia

People on dialysis often get anemia (low red blood cell count). To treat anemia, you will need to take a special medicine called an ESA (erythropoiesis stimulating agent) and/or iron supplements to help make red blood cells.

### Mineral and bone disorder

Mineral and bone disorder can cause your bones to become more brittle and your arteries to stiffen and become narrow from the extra calcium and phosphorus in your blood. It can also lead to itchy skin. Your care team can help you choose lower phosphorus foods and may have you take medicine called phosphate binders.

### Foot infections

People on dialysis have a higher risk of foot ulcers and infections. Diabetes also increases that risk, so it's important to get regular foot exams and see a podiatrist as needed.



## We are here to help

Your care team is here to support you through your ESKD and diabetes journey. Reach out with any questions.