How to take care of children’s kidneys?

Kidney diseases sometimes are silent and when they are detected it can be too late.

Rules to have healthy kidneys

1. **Physical fitness.** Children should keep a weight according to their height. They should be active. Fitness is useful to avoid obesity and to reduce blood pressure, which could both damage kidneys and cause or worsen CKD.
2. **Blood pressure.** After 3 years of age, pediatricians should measure blood pressure in their yearly checkup.. Normal blood pressure levels vary with age, gender and height percentiles. Kidney diseases can cause hypertension and, on the other hand, high blood pressure can affect kidneys. Primary hypertension, usually running in the family, has increased in incidence in the last years in adolescence and it is also associated with obesity.
3. **Eat healthily.** Salt is not recommended in infants. Therefore, do notadd salt to their food. Avoid processed products and fast food. This is a good life practice because it can help to keep an ideal body weight, reduce blood pressure, prevent heart disease, just to name a few.
4. **Appropriate fluid intake. Drink water. Avoid juices and soda.** The right level of fluid intake for all children depends on many factors, including exercise, climate and health conditions. The amount of water of the body is regulated by the thirst mechanism and the kidneys. Fluid intake may need to be adjusted if the child has kidney disease. Consult your doctor on the appropriate fluid intake for specific conditions.
5. **Don’t smoke.** In the case of adolescents, smoking should be discouraged since it slows blood flow to the kidneys. When less blood reaches the kidneys, the ability to function normally can be decreased.
6. **Avoid over-the-counter anti-inflammatory/pain-killers regularly.** Common drugs such as non-steroidal anti-inflammatory (NSAIDS) / pain-killers (e.g. ibuprofen) can harm the kidneys if taken regularly. In case of kidney disease or decreased kidney function, taking just a few doses can harm the kidneys. If in doubt, ask the doctor.
7. **Patients with renal mass reduction should follow all these advices but they also need medical controls. Most of these children are asymptomatic and seem healthy. If a child has less nephrons, the work that they have to do is higher, leading to glomerular hyperfiltration and hypertension. This compensatory mechanism becomes evident by the waste of proteins in urine (albuminuria). To demonstrate its presence a urine analysis should be performed. In presence of significant and persistent albuminuria renal protective measures to preserve the renal function should be implemented, like a normal protein intake. Examples of children with renal mass reduction are those with a single kidney, children who were preterm and low weight, cyanotic heart disease patinets, newborns with congenital abnormalities of the kidney and urinary tract, and all those patients who have suffered a severe kidney disease like the “Hemolytic Uremic Syndrome”, “Congenital Nephrotic Syndrome” and Acute Kidney Injury due to sepsis among others.**