Women’s health and chronic kidney disease
Patient Information

Working together for better patient information
Chronic kidney disease (CKD) can affect anyone. In the United Kingdom, the leading causes of CKD are diabetes and high blood pressure - diseases which affect both men and women. This leaflet is about how CKD affects women in particular and also how certain aspects of women’s health can affect CKD.
Kidney infections affect women more than men. Frequent or untreated kidney infections can cause scarring on your kidneys and increase your risk of CKD. Early treatment can usually help prevent long term problems. To avoid getting kidney infections you should:

- Drink plenty of fluids, especially plain water
- Go to the toilet as soon as you feel the need to, don’t hold it in
- Wipe from the front to the back after going to the toilet
- Go to the toilet after having sex
- Try to avoid getting constipated as constipation can increase your chance of developing a kidney infection

Why are kidney infections more of a problem for women?

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Can CKD affect my periods?

You periods will probably become irregular and may stop completely if you need to start dialysis. This can affect your fertility (ability to get pregnant) as it becomes more difficult to conceive without a regular menstrual cycle.

Dialysis cannot replace all of the functions of normal kidneys and your body retains a higher level of waste toxins. These can prevent egg production or release of your eggs.

Anaemia (low levels of iron in the blood) is common in CKD and you may be treated with a drug called erythropoietin. This also helps to improve your hormone levels which can cause your periods to return and increase your fertility.

Even if your periods are irregular, you should still use contraception if you are sexually active and do not want to become pregnant.
Can CKD affect my sexual health?

You may find that your sex drive reduces with CKD. There are several reasons for this including emotional, physical and psychological factors. Some medicines can also cause tiredness or reduced sex drive. Having a long-term illness like CKD can affect your job, income and family life. These added stresses and lifestyle changes can all impact on your body image and level of sexual desire.

CKD and its treatments can affect your weight, which may make you see your body in a different way (affect your body-image). If you are on dialysis you may worry about that PD catheter tube or fistula is unattractive or that you may damage your dialysis access during sexual intercourse. Talking these concerns through with a supportive partner may help. It is rare that dialysis access is damaged during intercourse.

Some medicines can also cause tiredness or reduced sex drive. Lower hormonal levels can make it difficult for some women to become aroused or may cause them to experience vaginal dryness or painful intercourse. A water-soluble vaginal lubricant can be used to help reduce dryness, but you should discuss any concerns with your doctor. Changes to blood pressure medications, hormone supplements or anaemia treatment can also help with some of these symptoms.
Can I get pregnant if I have CKD?

Talk to your kidney doctor if you are thinking of trying for a baby, as they can give you personalised advice that is right for your situation.

Pregnancy can cause a sudden loss of your kidney function, especially if you have a pre-existing kidney disease. If you are pregnant and have high blood pressure or are overweight, you are at greater risk of developing a disease called pre-eclampsia. This can cause kidney failure known as acute kidney injury (AKI). If you have had pre-eclampsia or AKI during pregnancy you are at higher risk of developing high blood pressure and CKD later on in life.

If you have CKD or are on dialysis while pregnant, your baby may be born early or be smaller than expected. This is often due to high blood pressure during pregnancy which can also affect your kidney function.

There are very few women these days who are advised not to get pregnant. Getting good antenatal care from the earliest stages of pregnancy generally makes it better for you and the baby. It is very rare but not impossible to get pregnant if you are on dialysis. There is evidence that longer haemodialysis sessions (16-24 hours per week) can help improve your chance of getting pregnant and your baby’s chances of survival. Early discussion with your doctor can help increase your chance of successful pregnancy and allow appropriate treatment decisions to be made.

Some medications are not safe to take during pregnancy so you may need to change your treatment before you try to conceive. Talk to your doctor or pharmacist to see if your medicines are safe to take if you get pregnant but do not stop your medications without taking medical advice.
It is important that everyone attends their cancer screening examinations, regardless of whether they have CKD. Having CKD does not put you at increased risk of cervical or breast cancer, so you will not need to go for more frequent screening but just ensure that you attend your appointments when invited.

Some research has suggested that women with CKD may go through the menopause early compared to the general population, but there is a lack of robust data to confirm this. If your periods stop while on dialysis this does not necessarily mean you are going through menopause. Your periods and fertility are likely to come back if you have a transplant.
The reduction in hormone levels that occurs during the menopause may increase your risk of osteoporosis (thinning of the bones). This risk increases if you are on dialysis, which can also lower your hormone levels, or if you have had a transplant due to the anti-rejection drugs that you must take.

To help reduce the risk of osteoporosis, additional dietary calcium, or supplements prescribed by your doctor may be needed. If you have any questions or concerns about this, please talk to your doctor or dietician.

How will going through the menopause affect me?

Is it safe to take HRT if I have CKD?

Yes in most cases. HRT (hormone replacement therapy) can be taken to relieve most of the menopausal symptoms unless you have uncontrolled high blood pressure. In this case, your blood pressure will need to be controlled before you can start HRT.

HRT may also be unsuitable for you if you have a history of breast cancer, ovarian cancer, womb cancer, liver disease or a history of blood clots. In these situations, you may need an alternative to HRT. Talk to your doctor about your options.

What can I do to help manage CKD?

Living a healthy lifestyle, including making sensible food choices, ensuring you are a healthy weight, getting plenty of exercise and managing your stress levels will all help your overall health and well-being.

If you have high blood pressure or diabetes, you will probably need medication, as well maintaining a healthy diet and lifestyle. If your doctor has prescribed a treatment for your kidney disease it is important that you take this as instructed. Talk to your doctor if you have any concerns or problems with this.
Where can I find out more information?

- NHS Choices: Chronic Kidney Disease - www.nhs.uk/conditions/kidney-disease
- RareRenal – www.rarerenal.org – Information on rare kidney disease, including advice on pregnancy and CKD.