Microalbuminuria
(Protein in the Urine)

Measuring the protein (*albumin*) in your urine is a means of detecting early *renal* (kidney) disease in diabetics. The less sensitive dipstick test is not be able to detect it. Increased albumin in the urine is an indication of early renal (kidney) disease. This test is valuable. It gives an indication as to whether renal disease is developing or is already present, and to what degree.

PREPARATION FOR TEST

There is no special preparation or diet prior to test. The test requires a 24 hour urine collection. No preservatives are necessary. When collecting your urine, pick out a time to begin your test and empty your bladder. Discard this first portion of urine. Following this, keep all urine passed in the container. When your time is up 24 hours later, empty your bladder completely keeping this portion as part of the specimen. Take the urine into the lab or caregiver's office as directed.

For the protection of your privacy, test results can not be given over the phone. Make sure you receive the results of your test. Ask as to how these results are to be obtained if you have not been informed. **It is your responsibility to obtain your test results.** Even if the kidneys are beginning to show signs of disease, it is important to maintain control of your diabetes to slow down progression and try to prevent renal failure. **Good blood sugar control greatly lessens the complications of diabetes.**

NORMAL VALUES

20 to 250 microgram/minute suggests the onset of diabetic kidney disease (*nephropathy*). This is associated with high blood pressure (*hypertension*). A high albumin excretion is associated with renal failure (the kidneys no longer do their job adequately) and other complications of diabetes (hardening of the arteries, heart disease etc.) Your caregiver can discuss the meaning of your test results with you and what you can do to slow this process down.

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