Chronic Kidney Disease (APOL1-Related)

Dear Jamie,

You do not have the two genetic variants we tested.

However, more than 95% of chronic kidney disease is not currently treatable. In this new field of chronic kidney disease research, genetic factors, family history, and gender seem to be additional risk factors.

If you have experienced family history of chronic kidney disease or component to talk to a healthcare professional.

How To Use This Test

This test does not diagnose chronic kidney disease or any other health conditions. Please talk to a healthcare professional if you have any questions about your health.

Return to Genetic Health Risk Laboratory
See Frequently Asked Questions

Intended Use

Risk for the APOL1 and KEI6 genotypes tests APOL1-Related genetic variants that have been associated with increased risk for chronic kidney disease.

Limitations

- The test does not detect other genetic variants linked to chronic kidney disease.
- Some variants on the test do not affect chronic kidney disease.
- The test does not give information about your risk for other genetic factors, background health history, and family history that might influence your risk for chronic kidney disease.

Important Notice

- Results may not apply to people outside of the United States.

Additional Notice

- This service is only available to people with African ancestry in accordance with Privacy and Security Notice

You do not have the two variants we tested linked to APOL1-related chronic kidney disease.

However, people with these variants do not have APOL1-related chronic kidney disease often.

Lifestyle and other factors can also influence the chances of developing chronic kidney disease.

Consult with a healthcare professional to make any major lifestyle changes.

About Chronic Kidney Disease

The information about APOL1-related chronic kidney disease as well as chronic kidney disease risk factors can be found here:

1. What is APOL1-related chronic kidney disease?
2. Signs and symptoms
3. Risk factors
4. How common is the condition?
5. How is it treated?

Learn more about APOL1-related chronic kidney disease.

See Frequently Asked Questions for more information.

If you have any history of chronic kidney disease or think you have experienced significant symptoms, you should talk to a healthcare professional.
Chronic Kidney Disease (APOL1-Related)

Chronic kidney disease is a condition in which the kidneys stop working properly over time. Because the kidneys affect all of our blood, even when kidney disease is not severe, it is a serious health concern. The good news is that we can help prevent or delay its progression if we catch it early. This includes two variants in the APOL1 gene that increase the risk of developing chronic kidney disease. These variants are most common in people of African descent.

Chronic Kidney Disease (APOL1-Related)

How is APOL1-related chronic kidney disease different from other types of chronic kidney disease?

Chronic kidney disease is a condition in which the kidneys stop working properly over time. Many factors can influence a person's chances of developing chronic kidney disease, including genetics, body mass index, diabetes, and other health conditions. For example, diabetes and high blood pressure are two of the biggest risk factors for chronic kidney disease.

There are several different types of chronic kidney disease, which are all defined based on the underlying cause and how the kidneys are affected. For example, diabetes can lead to diabetic-related chronic kidney disease, and high blood pressure can lead to hypertension-related chronic kidney disease. As chronic kidney disease progresses, it can lead to end-stage kidney disease, which usually results in kidney failure.

Two specific variants in the APOL1 gene -- called G1 and G2 -- are associated with an increased risk for chronic kidney disease. Having two APOL1 variants in two copies of the APOL1 gene increases the risk for many types of chronic kidney disease including hypertension-related chronic kidney disease and some types of end-stage kidney disease. (Note, these variants do not increase the risk of developing diabetes-related chronic kidney disease.) However, people with two APOL1 variants are still at risk for this type of chronic kidney disease.

Novel Scientific Details - More Information...

Scientists are still working to understand how the APOL1 G1 and G2 variants increase the risk of chronic kidney disease. They are also working to understand how these variants can affect the treatment and outcomes in people with APOL1-related chronic kidney disease compared to people with chronic kidney disease due to other factors.

What does the text do?

This text provides information on the causes and risk factors for chronic kidney disease, including the role of genetics. It also explains how two specific variants in the APOL1 gene increase the risk of chronic kidney disease.

What does this test do not?

This text does not diagnose chronic kidney disease. Only a healthcare professional can do that.

The report says the variants included in this test are most common and best studied in people of African descent. What if I'm not of African descent?

The effect of these variants on the risk of developing chronic kidney disease is best understood in people of African descent, because the variants are most common in that population. People who are not of African descent (who both have genetic variants, or neither of these variants, as) are still expected to have an increased risk of developing chronic kidney disease. See Scientific Details for more information.

Where can I learn more about chronic kidney disease, support groups, and other resources?

You can learn more about chronic kidney disease from the following resources:

- National Kidney Foundation
- American Kidney Fund
- American Association of Kidney Patients
- Renal Support Network

If you have questions about your results or how they might affect you or your family, a genetic counselor may be able to help. Learn more about genetic counseling.

My report says single variants were detected. What does this mean?

This means you do not have either of the two genetic variants we tested for in APOL1-related chronic kidney disease.

However, people without these variants are still at risk for chronic kidney disease due to other factors. It's suggested that at least 85% of adults in the U.S. will develop chronic kidney disease during their lifetime. Most cases of chronic kidney disease are not caused by the APOL1 genetic variants in this report.

Your risk for chronic kidney disease is also influenced by many other factors, including lifestyle, family history, and other genetic variants. Learn more about other factors.

My report says single variants were detected. What are some other things I could do?

This genetic result is not associated with an increased risk of developing APOL1-related chronic kidney disease. However, people with this result are still at risk for other types of chronic kidney disease because many other genetic and non-genetic factors can also affect your risk. Learn more about other factors.

Considering talking to a healthcare professional if...

- Chronic kidney disease runs in your family.
- You think you might have chronic kidney disease.

You have questions about other risk factors you may have.

Is this answer helpful?

Yes No