American Heart Association.

Top Take-Home Messages for Public Health Practitioners & Community Health Workers

Adapted from: 2026 AHA/ACC/ADA/ASN Guideline for the Prevention, Detection, Evaluation, and Management of Cardiovascular-Kidney-Metabolic Syndrome

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1. Cardiovascular-Kidney-Metabolic Syndrome Staging

Cardiovascular-kidney-metabolic (CKM) syndrome staging is recommended for youths and adults to prevent progression and promote regression of CKM syndrome. Less severity of CKM syndrome is associated with lower risk for cardiovascular events and loss of kidney function across the life course. *(Section 3.1)*

2. Routine Assessment for CKM Risk Factors

All adults should undergo routine testing for metabolic risk factors and kidney function. Community-based screenings are critical for preventing the development and progression of CKM syndrome by detecting early-stage CKM risk factors among people who may be asymptomatic and lack access to routine health care. *(Section 3.1.1)*

3. Risk-Enhancers for CKM Syndrome

People with risk-enhancers for CKM syndrome, such as those who experience adverse social determinants of health (SDOH), chronic inflammatory conditions, family history of diabetes or kidney failure, or belong to a high-risk demographic population, among other factors, may benefit from more intensive preventive approaches. *(Section 4.2)*

4. Evaluate and Address SDOH

An essential component of whole-person care is addressing negative SDOH identified through systematic screening. Assessing for SDOH can help determine an individual's health-related social needs linked with the development and progression of CKM syndrome. *(Section 3.2)*

5. Role of Community Health Workers role in Interdisciplinary Care

Community health workers (CHWs) play a key role in the CKM interdisciplinary care team, both in the clinical and community setting, by supporting patients with education, social support, coaching for lifestyle management, care coordination and connection to local community resources. *(Section 5.1)*

6. Support for Weight and Obesity Management

Community organizations and health practitioners provide awareness, education and access to health promotion activities, and connection to medical care to support weight management and diabetes control for the prevention and management of CKM syndrome. *(Section 5.4.1)*

7. Assess for Chronic Kidney Disease and Use Kidney Protective Agents

Screening and monitoring patients for chronic kidney disease (CKD) using two complementary laboratory tests, estimated glomerular filtration rate (eGFR) (to measure kidney function) and urine albumin-to-creatinine ratio (UACR), (to determine kidney damage) are recommended to identify and categorize the severity of CKD. These tests also help guide the use of kidney-protective medications that provide both cardiovascular and kidney benefits. *(Section 5.5.4)*

8. Address CKM Risk Factors in Patients with Atherosclerotic Cardiovascular Disease and Heart Failure

Management of atherosclerotic cardiovascular disease and heart failure should emphasize addressing CKM syndrome comorbidities, such as obesity, type 2 diabetes (T2D) and CKD. Management may include obesity treatment through lifestyle modification, with additional support from medications or metabolic and bariatric surgery when needed; the use of cardioprotective glucose-lowering medications for T2D; and the use of kidney-protective medications for CKD. These therapies all reduce the risk for detrimental cardiovascular events and loss of kidney function. *(Section 6.1)*