Management of hypertension in chronic kidney disease

Neeraj Dhaun (Bean)

Queen's Medical Research Institute, University of Edinburgh, Centre for Cardiovascular Science, UK

Chronic kidney disease (CKD) is common, affecting 6-11% of the population in the developed world. Hypertension is an independent risk factor for CKD progression, and is a frequent finding in patients with CKD. Its prevalence increases as CKD progresses, with over 75% of patients with a glomerular filtration rate <30ml/min having a blood pressure (BP) >140/90mmHg. Despite treatment with multiple antihypertensive agents the majority of CKD patients fail to reach target BP. Recent studies have supported lower BP targets in select groups of patients with CKD as well as avoiding use of dual renin-angiotensin system blockade in all of these patients. Here, we shall review the optimal method of BP assessment in CKD as well as recent insights into its optimal management.