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European Renal Association – European Dialysis and Transplant Association

How to achieve awareness for blood pressure control in CKD patients?

A study in the current issue of ckj [1] shows that a multi-level intervention on blood pressure control in CKD patients is acceptable to patients and primary care healthcare teams – so why not implement it?

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Controlling blood pressure is crucial in patients with chronic kidney disease (CKD), because high blood pressure is one of the factors that drives the disease and its cardiovascular mortality. It is a known fact that high blood pressure, which is a common concomitant phenomenon of CKD, also aggravates CKD. Many studies showed that lowering blood pressure of CKD patients into the target range (at least below 140/90 mm Hg) is an effective way to slow CKD progression. This means that CKD patients with controlled blood pressure can live longer without having to undergo renal replacement therapy (dialysis or transplantation - which patients need in the final stage of the disease, the so-called end stage renal disease). Controlling hypertension is the number one primary prevention strategy of CKD.

But: Although CKD affects about 10% of the population, the awareness of CKD among those with the disease remains very low. Experts estimate that only about 10% of all CKD patients are aware of their disease. This means that 90% are not and do not know about their impaired kidney function at all. Therefore, they are not able to implement any prevention strategy. "This is a big issue, because CKD has become a pressing public health problem. Renal replacement therapy is expensive and lot of costs could be saved by raising awareness for CKD and implementing effective prevention measures. This is one of the aims the European Renal Association – European Dialysis and Transplant Association (ERA-EDTA) wants to reach", explains ERA-EDTA president, Professor Carmine Zoccali.

A study [1] published in ckj, one of the association's journals, analyzed the acceptability of a multi-level intervention to improve blood pressure control among CKD patients in a public healthcare delivery system. The trial consisted of a clinical based intervention: (1) a primary care CKD registry with point-of-care provider notifications and quarterly feedback related to CKD, and, (2) a patient directed intervention (a self-management support program with educational materials, automated telephone administered self-management modules, and telephone health



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coaching). Both, patients as well as primary care providers, came to the conclusion that these interventions were beneficial and useful. “We believe that programs like this have the potential to raise awareness for CKD in patients and doctors and to improve management of CKD in primary care”, comments Professor Alberto Ortiz, ckj’s editor-in-chief. “We hope that such CKD prevention programs will soon be implemented in clinical routine”

[1] Adrienne Strait et al. Acceptability of a Multi-Level Intervention to Improve Blood Pressure Control among Patients with Chronic Kidney Disease in a Public Healthcare Delivery System. CKJ 2017. www.academic.oup.com/ckj/advance-article/doi/10.1093/ckj/sfx141/4762253

About ERA-EDTA

With more than 7,500 members, the ERA-EDTA ("European Renal Association – European Dialysis and Transplant Association") is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. It also supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all its activities ERA-EDTA has the "Young Nephrologists' Platform" (YNP), a very active committee whose board includes members who are 40 years old or younger. Besides, it has established various working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board was established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association's journals, NDT (Nephrology, Dialysis, Transplantation) and CKJ (Clinical Kidney Journal), are currently the leading nephrology journals in Europe; furthermore NDT-Educational is the online educational journal, open for free to all uses, of the Society as well as the very important and useful feature of NDT-Educational "Literature Review". The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. ENP, the European Nephrology Portal, is the latest new initiative of ERA-EDTA: here all those interested in the activities of the Society can find everything that is done, all in one place! Finally, ERA-EDTA is a member of the European Kidney Health Alliance (EKHA), a consortium of patients, nurses, foundations all related to renal issues that actively interacts with the European Parliament. For more information please visit www.era-edta.org