

# A Key Strategy for Delaying Chronic Kidney Disease

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**Keywords:** CKD • Kidney function • Dialysis

## Letter to Editor

Sir/Madam,

I am writing to express my thoughts on the crucial topic of intensive blood pressure (BP) control and chronic kidney disease (CKD) progression. CKD is a global public health concern, affecting millions of people worldwide. Hypertension is a significant risk factor for CKD progression and is present in up to 80% of patients with CKD. It is therefore essential to understand the relationship between BP control and CKD progression to prevent or delay the onset of end-stage renal disease (ESRD). Studies have shown that intensive BP control can slow the progression of CKD and delay the onset of ESRD. The Systolic Blood Pressure Intervention Trial (SPRINT) was a landmark study that demonstrated the benefits of intensive BP control in reducing cardiovascular events and mortality rates in patients with hypertension. In patients with CKD, the Modification of Diet in Renal Disease (MDRD) study showed that intensive BP control significantly reduced the risk of ESRD.

Despite the compelling evidence supporting intensive BP control, many patients with CKD continue to have poorly controlled hypertension. Barriers to achieving optimal BP control include medication non-adherence, inadequate dosing, and lack of patient education. Additionally, patients with CKD may require adjustments in their antihypertensive medication regimen due to the risk of adverse effects, including hyperkalemia, which may require treatment with potassium binders. Healthcare providers play a crucial role in helping patients achieve optimal BP control by prescribing appropriate antihypertensive medication, educating patients about lifestyle modifications, and monitoring BP regularly. Patient education is particularly important in encouraging medication adherence and promoting healthy behaviors, such as a low-sodium diet, regular exercise, and smoking cessation.

Intensive BP control is a critical component of managing CKD to prevent or delay the onset of ESRD. Healthcare providers should prioritize optimizing BP control in patients with CKD by prescribing appropriate medication, educating patients about healthy behaviors, and monitoring BP regularly. Improving BP control in patients with CKD can significantly reduce the risk of ESRD, improve patient outcomes, and reduce the burden of CKD on healthcare systems worldwide. CKD is a progressive disease that often leads to ESRD, a condition requiring dialysis or kidney transplantation. The economic burden of ESRD is significant, with healthcare costs in the US exceeding \$35 billion annually. The prevention or delay of ESRD by optimizing BP control in patients with CKD can reduce the financial burden on healthcare systems and improve patient outcomes.

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**Received:** 02 February, 2023, Manuscript No. JNT-23-94836; **Editor Assigned:** 04 February, 2023, PreQC No. P-94836; **Reviewed:** 16 February, 2023, QC No. Q-94836; **Revised:** 21 February, 2023, Manuscript No. R-94836; **Published:** 28 February, 2023, DOI: 10.37421/2161-0959.2023.13.440

Intensive BP control is also associated with a reduced risk of cardiovascular events and mortality rates in patients with CKD. Hypertension is a significant risk factor for cardiovascular disease, and patients with CKD are at increased risk for cardiovascular events, including heart attack and stroke. Intensive BP control not only reduces the risk of ESRD but also improves cardiovascular outcomes in patients with CKD.

Furthermore, the benefits of intensive BP control extend beyond CKD to other comorbid conditions commonly seen in patients with CKD, such as diabetes and heart failure. These conditions also benefit from optimal BP control, emphasizing the importance of aggressive BP management in this patient population [1-5].

## Acknowledgement

Not applicable.

## Conflict of Interest

There is no conflict of interest by author.

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**How to cite this article:** Morgan, Peter. "A Key Strategy for Delaying Chronic Kidney Disease." *J Nephrol Ther* 13 (2023): 440.