# Deficits in CKD screening and management in European patients with hypertension – a call to action

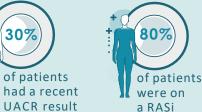
### Background



- CKD is a frequent co-morbidity in hypertensive patients<sup>1</sup>
- In 2023, ESH conducted a 64-question survey in 88 ESH-Excellence Centres (ECs) in 27 countries to assess the screening, diagnosis and management of CKD in patients with hypertension at referral to ESH-ECs<sup>1</sup>

## CKD screening and management of patients at referral to ESH-ECs<sup>1</sup>







- ) Survey results indicated deficits before referral to ESH-ECs in:
  - CKD screening
  - Use of nephroprotective drugs
  - Referral to nephrologists

### Optimized management of patients with hypertension and CKD requires:



Screening and diagnosis of CKD to be performed as part of the basic assessment of hypertensive patients<sup>2</sup>



Guideline-directed medical therapy to be consistently implemented to improve the management of hypertensive patients with CKD<sup>3</sup>

In line with the **2024 ESH Clinical Practice Guidelines for the management of arterial hypertension**,<sup>2</sup> and supporting literature in the **2023 ESH Guidelines for the management of arterial hypertension**<sup>3</sup>

This infographic has been developed in collaboration with ESH and AstraZeneca, with funding provided by AstraZeneca. CKD = chronic kidney disease; EC = Excellence Centre; eGFR = estimated glomerular filtration rate; ESH = European Society of Hypertension; RASi = renin-angiotensin system inhibitor; SGLT2i = sodium-glucose co-transporter-2 inhibitor; UACR = urine albumin-creatinine ratio. 1. Halimi J-M, Sarafidis P et al. J Hypertens 2024;42:1544-1554; 2. Kreutz R, Brunström M et al. Eur J Intern Med 2024;126:1-15; 3. Mancia G, Kreutz R et al. J Hypertens 2023;41:1874-2071; 4. Halimi J-M, Sarafidis P et al. Blood Press 2024;33:2368800.

#### Additional resource:



Management of hypertensive patients with CKD at ESH-ECs (publication)<sup>4</sup>





