

Early Detection and Prevention of Chronic Kidney Disease

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Chronic Kidney Disease (CKD) is a common disorder and its prevalence is increasing worldwide including Bangladesh. Early diagnosis on the basis of presence of proteinuria or reduced estimated glomerular filtration rate could permit early intervention to reduce the risks of cardiovascular events, kidney failure and death that are associated with chronic kidney disease. In developed countries, screening for the disorder is most efficient when targeted at high-risk groups including elderly people and those with concomitant illness (Such as diabetes, hypertension or cardiovascular disease) or a family history of chronic kidney disease, although the role of screening in developing countries is not yet clear. Effective strategies are available to slow the progression of chronic kidney disease and reduce cardiovascular risk. Treatment of high blood pressure is recommended for all individuals with, or at risk of chronic kidney disease. Use of angiotensin-converting-enzyme inhibitors or angiotensin receptor blockers is preferred for patients with diabetic chronic kidney disease or those with the proteinuric non-diabetic disorder. Glycaemic control can help prevent the onset of early stages of chronic kidney disease in individuals with diabetes. Use of statins and aspirin is beneficial for most patients with chronic kidney disease who are at high cardiovascular risk, though research is needed to ascertain how to best prevent cardiovascular disease in this cohort. Models of care that facilitate delivery of the many complex aspects of treatment simultaneously could enhance management, although effects on clinical outcomes need further assessment. Novel clinical methods to better identify patients at risk of progression to later stages of chronic kidney disease, including kidney failure are needed to target management to high-risk subgroups.

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