



Leading European Nephrology

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European Renal Association – European Dialysis and Transplant Association

Ambulatory Blood Pressure Monitoring (ABPM) in Dialysis Patients?

Embargoed until 28 May 2015; 18:00 pm

Ambulatory blood pressure monitoring (ABPM) is a non-invasive method of obtaining blood pressure readings over a 24-hour period. The blood pressure measurement 24-hour while the patient is at home or at work (in his /her “normal” environment) seems to be a very reliable method of detecting hypertension – therefore the NICE guidelines recommend the application of ABPM for the diagnosis of hypertension in the general population. Since peri-dialysis blood pressure measurement in ESRD patients can sometimes result in misclassification, it might be wise to routinely apply ABPM in these patients, too. Besides, many studies have shown that blood pressure measured over a 24-hour period is superior to clinic blood pressure in predicting future cardiovascular events and organ damage.

But whether 24h or 44h ABPM should be more frequently applied in the dialysis population is an open, fundamental question. NDT has set a crisp debate on this important clinical problem by inviting two leading investigators in the field, Rajiv Agarwal (USA, Indiana University) and Alain Jardine (Great Britain, Glasgow) to present the pros and the cons of ABPM.

Obviously, there is the need of new trials to get evidence and joint efforts by several investigators are made for planning new studies. “But as long as there is no data that answers this question, nephrologists have to decide opinion-based. But to be able to form an opinion, they should be acquainted with the pro and con arguments – and this is why we set up this debate”, explains Prof. Carmine Zoccali, NDT Editor-in-Chief.

**“NDT Pearls and Polar Views” at the ERA-EDTA Congress in London.
Date: 29-05-2015, from 11:45 to 13:15
Room: Capital Suite 17**

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About ERA-EDTA

With more than 7,000 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. The ERA-EDTA 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 activities of the ERA-EDTA the Council decided to create a Young Nephrologists' Platform (YNP). Besides, it has established various research networks and different 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 has been 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. The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. Finally, ERA-EDTA is member of the European Kidney Health Alliance (EKHA), a consortium of renal societies that actively interacts with the European Parliament. For more information please visit www.era-edta.org