

Clinical trials of intensive blood pressure control for hypertension in patients with chronic kidney disease

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1 Treatment blood pressure target

Trial	Treatments	Patients	Trials design and methods
more intensive blood pressure lowering strategie vs less intensive blood pressure lowering strategie			
AASK , 2002 n=540/554 follow-up: (range 3-6.4y)	arterial pressure goal of 92 mm Hg or lower versus usual mean arterial pressure goal of 102 to 107 mm Hg/pj	African-Americans,with diastolic blood pressure higher than 94mmHg and a glomerular filtration rate between 20 and 65 ml/min per 1.73 m2	Parallel groups open USA
REIN-2 , 2005 n=169/169 follow-up: 36 months	intensified (systolic/diastolic <130/80 mm Hg) blood-pressure control versus conventional (diastolic <90 mm Hg) blood-pressure control	patients with non-diabetic proteinuric nephropathies receiving background treatment with the ACE inhibitor ramipril	open
MDRD , 1994 n=840 follow-up: 2.2 y	low target blood pressure (mean arterial pressure <92 mm Hg) versus usual target blood pressure (mean arterial pressure <107 mm Hg)	patients with predominantly nondiabetic kidney disease and a glomerular filtration rate of 13 to 55 mL/min per 1.73 m2	open
Toto , 1995 n=42/35 follow-up:	strict blood pressure control (DBP 65 to 80 mm Hg) versus usual blood pressure control (DBP 85 to 95 mm Hg)	non-diabetic patients (age 25 to 73) with long-standing hypertension (DBP >or = 95 mm Hg), chronic renal insufficiency (GFR <or = 70 m/min/1.73 m2) and a normal urine sediment	open

References

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REIN-2, 2005:

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Toto RD, Mitchell HC, Smith RD, Lee HC, McIntire D, Pettinger WA "Strict" blood pressure control and progression of renal disease in hypertensive nephrosclerosis. Kidney Int 1995;48:851-9 [7474675]

2 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and meta-analysis in the field of all major heart and vessels diseases.

The TrialResults-center database provides a unique view of the treatment efficacy based on all data provided directly from clinical trial results, offering a valuable alternative to personal bibliographic search, published meta-analysis, etc. Furthermore, it would allow comparing easily the various concurrent therapeutic for the same clinical condition.

Rigorous meta-analysis method is used to populate TrialResults-center: widespread search of published and non published trials, study selection using pre-specified criteria, data extraction using standard form.

TrialResults-center is continually updated on a weekly basis. We continually search all new results (whatever their publication channel) and these news results are immediately added to the database with a maximum of 1 week.

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