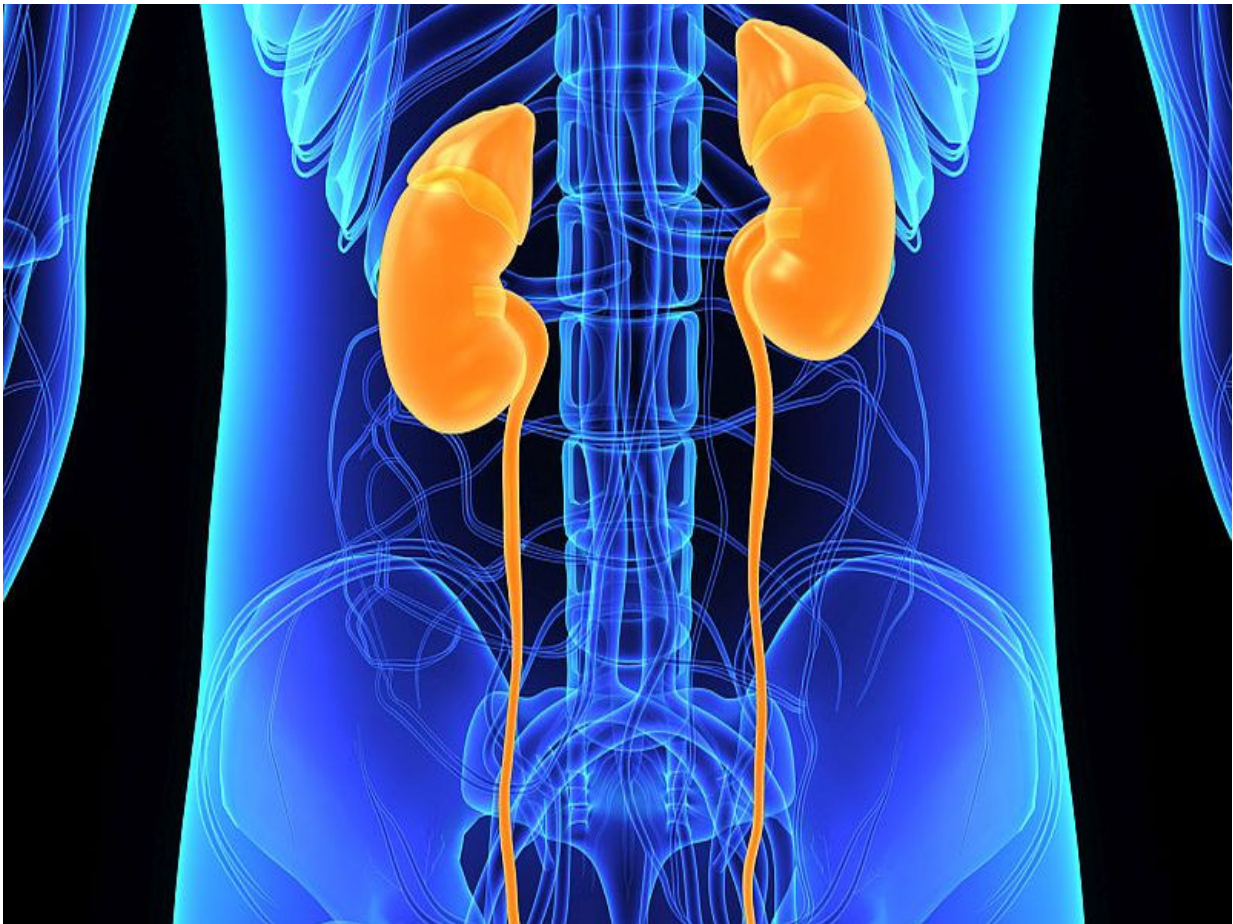


Ideal BP in elderly with chronic kidney disease unclear

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(HealthDay)—Age modifies the association between blood pressure

(BP) and adverse cardiovascular and renal outcomes in elderly patients with chronic kidney disease (CKD), according to research published online April 21 in the *Clinical Journal of the American Society of Nephrology*.

Csaba P. Kovesdy, M.D., of the University of Tennessee Health Science Center in Memphis, and colleagues analyzed data for 300,424 veterans with incident chronic kidney [disease](#) to examine the associations of [blood pressure](#) with mortality and [adverse outcomes](#).

The researchers found that both systolic and diastolic BP had a U-shaped association with all-cause mortality. Systolic BP showed a linear association, whereas diastolic BP showed no consistent association, with coronary heart disease (CHD), stroke, and end-stage renal disease (ESRD). For systolic BP ≥ 170 mm Hg compared with 130 to 139 mm Hg, hazard ratios for mortality were attenuated with increasing age as follows:

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