

# Arterial hypertension in chronic kidney disease in children



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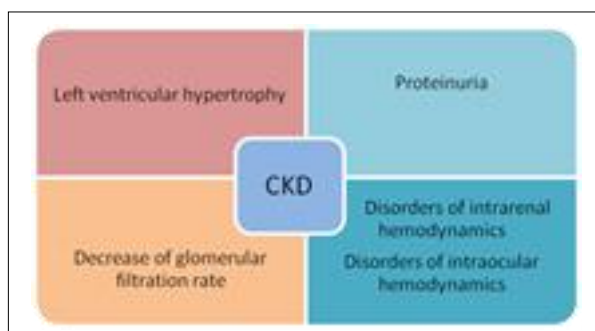
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### Biography

Bulbin Sucuoğlu is a full professor in early childhood division in the faculty of education at the Hacettepe University. Her research includes early childhood special education, quality of inclusive classrooms, professional development of teachers and parent training. Hatice Bakaloğlu is an associate professor of special education at the Ankara University. Her research focuses on early interventions for children with disabilities, inclusive preschools and preschool and special education teacher training.

### Abstract

**Statement of the Problem:** In hypertensive children with CKD heart, blood vessel, kidney, eyes and metabolic disorders occur that lead to cardiovascular diseases leading to complications and mortality. The purpose of this study is to study the state of target organs (TO) and the effectiveness of treatment of CKD in children with enalapril and thiotriazolin. **Methodology & Theoretical Orientation:** We examined 59 children with CKD. Children underwent daily monitoring of blood pressure, proteinuria (P), intrarenal (IRH) and intraocular (IOH) by dopplerography, glomerular filtration rate (GFR), cardiac echocardiography. To study the effectiveness of treatment, the patients were divided into 2 groups: the 1st-group - 18 children with CKD and AH, who received enalapril (E) therapy + thiotriazolinum (T), and the 2nd - 16 children received treatment with E alone. **Findings:** In 34 (57.2%) children was noted AH, in 11 (32.3%) children, AH was latent in 5 (45%) children latent AH was noted at night. In 16 (27.1%) patients were observed left ventricular hypertrophy (LVH). During treatment in all children of the 1st group, absence of AH and LVH was found, in children of the 2nd group, a decrease in the frequency of AH and regression of LVH was established. When studying the parameters of IRH, IOH, P, GFR in the dynamics it was found normalization of these indicators of both group, but more in the 1st. **Conclusion & Significance:** In children with CKD in 57.2% of cases there is AH, LVH, impaired IRH, IOH, GFR, P. The use of E with T in the treatment of CKD in children helps to stop and reduce AH, regression of LVH, improve IRH and IOH, GFR, P. In order to prevent the progression of CKD and TO damage in the early stages of the disease, it is rational to use E in combination with T.



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