



شبكة المعلومات الجامعية

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



شبكة المعلومات الجامعية
@ ASUNET



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكرو فيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأفلام قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأفلام بعيدا عن الغبار

في درجة حرارة من ١٥-٢٥ مئوية ورطوبة نسبية من ٢٠-٤٠%

To be Kept away from Dust in Dry Cool place of
15-25- c and relative humidity 20-40%

بعض الوثائق الأصلية تالفة

بالرسالة صفحات لم ترد بالاصل

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Degree in Nephrology*

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رأى حقاً محمد بن الحسين وراكبو البقية واد كاسه
النامية

W. S. R. L. L.

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INTRODUCTION

INTRODUCTION

Hypertension is a major cause of morbidity and mortality, which accelerate atherosclerosis and participate pressure related complications such as heart failure, stroke, renal failure and dissecting aneurysm (*Acosta, 1982*).

Although the first measurement of blood pressure was performed in 1711 When Reverend Stephen cannulated the carotid artery of a horse.

It was a century later that the association between kidney disease and hypertension was suggested in Richard Brights 1836 description of glomerulonephrities (*Bright, 1983*).

Another historic link between the kidney and hypertension comes from observation regarding the role of sodium chloride deprivation in treating patients with hypertension (*Porter, 1983*).

Finally it was the successful induction of experimental hypertension in the dog by Goldblatt and associates that provided a firm foundation for a key role of the kidney in causing hypertension (*Goldblatt et al., 1984*). 1934

An estimated 50 million Americans have high blood pressure. Hypertension is the leading cause of office visits to primary care physician.

Available evidence suggests that cardiovascular disease and all causes of mortality increases progressively with high blood pressure and that treatment of hypertension results in improved morbidity and mortality. However even with wide spread educational effort, it is estimated that only 27% of patients with hypertension have blood pressure controlled to less than 140/90 mm hg (*Kaplan, 1997*).

The aim of this work is to review the role of the kidney in blood pressure control and hypertension and how can hypertension affects the kidney.

Hypertension in patients undergoing dialysis and those with kidney transplantation will be high lighted. The pathology and pathogenesis of hypertension will be discussed. The mechanism by which the various antihypertensive drugs do their action through the kidney will be also discussed.

REVIEW OF LITERATURE

