

PATIENT SELECTION CONSIDERATIONS FOR RENAL DENERVATION IN TAIWAN

Clinicians Develop Patient Identification Tool for RDN

The Taiwan Hypertension Society published a [consensus statement](#) about renal denervation (RDN), which included a helpful tool to identify RDN patients called RDN-i2.

R = Resistant

Blood pressure (BP) uncontrolled under maximally tolerated doses of BP-lowering drugs of ≥ 3 classes for ≥ 1 months

D = Damage

Hypertension-mediated organ damage (brain, heart, eye, blood vessel, and kidney) or established cerebro- or cardiovascular disease

N = Non-adherent

- Patient preference and adherence explored on a regular basis
- Inscrutable causes, such as inconvenience, forgetfulness, etc.

i = Intolerant

Adverse events of BP-lowering drugs, like erectile dysfunction, asthenia, should be explored on a regular basis

2 = Secondary Causes

- Definitely treated for ≥ 3 months but BP still uncontrolled
- Irreversible causes, for example, renal parenchymal disease

“ RDN should not be viewed as an anti-hypertensive treatment strategy only for patients with resistant hypertension. ”

2019 THS and TSC
Consensus Statement

¹ Wang TD, Lee YH, Chang SS, et. al. 2019 Consensus Statement of the Taiwan Hypertension Society and the Taiwan Society of Cardiology on Renal Denervation for the Management of Arterial Hypertension. *Acta Cardiologica Sinica*. 2019;35:199-230.