Introduction

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Since nearly half the deaths in haemodialysis patients in the US alone in 1998 were the result of cardiovascular disease, the recent attention paid by clinicians to the long-term management of patients with chronic renal failure is not surprising. Indeed, new approaches to the treatment of renal anaemia, aimed specifically at minimizing disease progression and preventing cardiac dysfunction, are clearly needed. The theme of this technical forum entitled 'Past, present and future challenges in renal anaemia', which took place at the 36th ERA-EDTA Congress in Madrid on September 6th, 1999, is the use of erythropoietin in the management of renal anaemia in patients with chronic renal failure.

Dr. Dimitrios Tsakiris sets the scene in his presentation 'Morbidity and mortality reduction associated with the use of erythropoietin', by presenting a retrospective analysis of the management of several thousand dialysis patients using information accumulated in North American and European databases over several years. These data clearly support the view that erythropoietin has been very beneficial in reducing mortality associated with cardiovascular events in patients already on haemodialysis.

In his presentation, 'Aspects of cardiovascular burden in pre-dialysis patients', Dr. Tilman Drüeke refocuses attention onto pre-dialysis patients and describes how anaemia is a major risk factor for cardiovascular disease

even in these patients. He explains how considerable cardiovascular burden may be accumulated before the onset of erythropoietin therapy and how, on entering dialysis, many patients have already suffered myocardial infarction or a stroke. Dr. Drüeke suggests that the early correction of anaemia with erythropoietin should further improve both short- and long-term prognosis for patients with chronic renal failure by preventing the development of cardiovascular disease.

Dr. Iain Macdougall takes the problem of 'How to improve survival in pre-dialysis patients' a step further by proposing new strategies for improving prognosis in ESRD patients and summarizing the results of an interactive session, which was designed to find out current attitudes to treating pre-dialysis patients. Although many physicians treated at least some of their pre-dialysis patients with erythropoietin, the survey results clearly highlighted important gaps in long-term treatment strategies for these patients.

These presentations highlight the increased understanding of the role of renal anaemia in the development of cardiovascular disease and the benefits of its early management. Such advances are likely to improve the long-term prognosis and quality of life of patients with chronic renal anaemia.