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## New Treatment Strategies for Chronic Kidney Disease

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### Message from the Guest Editor

Current treatment strategies for Chronic kidney disease (CKD) include targeting blood pressure and albuminuria, avoiding nephrotoxins, and reducing cardiovascular risk. Nephrology is a fast-moving science, such is the example of new treatments for diabetic kidney disease, including renin–angiotensin system blockers, sodium–glucose cotransport inhibitors (SGLT2i), and mineralocorticoid receptor antagonists. Furthermore, research has shown a strong rationale for SGLT2 inhibition to be used as a standard of care for most CKD patients. Recent studies have shown that inflammation, myofibroblast activation, tissue hypoxia, cell loss, and extracellular matrix deposition lead to CKD. The translation of these findings from bench to bedside can improve the efficacy of treatments for CKD.

The focus of this Special Issue is to cover all new lines of treatment for CKD. The issue aims to contribute to a better understanding of the molecular mechanisms involved in CKD progression and how these can be targeted to slow or halt the progression of the disease. Ultimately, these advancements can improve the quality of life of patients with CKD.



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