



**Dear colleagues,**

A bidirectional association between renal dysfunction and cardiovascular changes is well-recognized. On the one hand, the kidney is a target organ for the majority of the known cardiovascular risk factors. On the other hand, the mechanisms leading to the renal dysfunction affect metabolism and hemodynamics contributing to the cardiovascular pathology. As a result, recent clinical recommendations have recognized chronic kidney disease as an independent cardiovascular risk factor.

This issue considers various aspects of kidney-heart interrelations. The editorial paper reviews the problem of the cardiovascular complications of inorganic phosphate in chronic kidney disease. Experimental and clinical data on the role of Klotho protein, which is considered a new endocrine and paracrine regulator of the phosphate metabolism, are presented.

One paper tells about molecular-cellular mechanisms underlying structural and functional fibrosis in kidneys and heart. We hope that original

papers about changes in blood pressure circadian rhythm in patients with heart failure associated with renal dysfunction, about renal artery remodeling in hypertension and sympathetic activation in experimental vasorenal hypertension will draw attention. With regard to the negative results of the prospective randomized trials on surgical renal revascularization we present the data of factors associated with the remote cardiovascular outcomes in these patients.

By the 55-anniversary of the Medical Faculty of the Russian People's Friendship University, the scientists who graduated from this University, presents a paper related to a highly relevant topic – the impact of target blood pressure achievement on arterial stiffness.

We hope that the information will be useful and will broaden cardiorenal outlook.

With best wishes,

Prof., Dr. med. **V.A. Dobronravov**  
Member of the Editorial Board