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Hypertensive urgency in a chronic kidney disease patient with hypertension after instituting Rifampicin: a case report

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Abstract

Chronic kidney disease (CKD) is associated with several comorbidities and these patients have an enhanced susceptibility to tuberculosis infection owing to their immunocompromised state. Rifampicin, a first-line antitubercular drug, is a potent Cyp450 enzyme inducer. It interacts with many drugs and is known to reduce bioavailability and plasma concentration, resulting in altered drug efficacy.

Herein, we report a case of hypertensive urgency in a man with Hypertension, Diabetes mellitus, and CKD due to drug-drug interactions between Tab Metoprolol succinate (25 mg once daily), Tab Nicardipine (20 mg thrice daily), and Tab Rifampicin (600 mg once daily). The patient's blood pressure attained baseline within 7 days of modifying the antihypertensive and antitubercular therapies.

Key words: Chronic kidney disease, Drug-drug interactions, Enzyme induction, Hypertensive urgency, Rifampicin

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