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Optimal Blood Pressure Target for the Patient with Septic AKI: Higher

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Despite the Surviving Sepsis Campaign's recommendation that patients in septic shock have an initial MAP target value of 65 mmHg, we note that there is insufficient evidence to support this MAP value. It is still debatable what the ideal mean arterial pressure (MAP) goal is for enhancing patient outcomes in vasodilatory shock.

Although maintaining a high MAP with vasopressors, even in patients aged 65 and up, has been considered standard practice for the management of patients affected by vasodilatory shock, the SEPSISPAM and OVATION trials, which evaluated optimal MAP targets, found no benefits while performing so. Because of this, the optimum MAP target for the treatment of vasodilatory shock, such as septic shock, has not been established. In particular, it is not yet known whether keeping a high mean arterial pressure (MAP) is linked with preventing organ damage from inadequate oxygenation or whether it is associated with more adverse events with the use of vasopressors.

To evaluate the impact of different blood pressure targets in sepsis, several clinical outcomes, such as all-cause mortality and acute kidney damage, should be taken into account. In this regard, I determined to evaluate the effects of increased BP goals on patients with septic AKI independently from various clinical endpoints.