

Treating high blood pressure right after stroke made no difference in recovery

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Lowering high blood pressure in the very acute initial period after a stroke made no difference in patient recovery in a late-breaking clinical trial presented at the American Heart Association's Scientific Sessions 2013.

Researchers for the China Antihypertensive Trial in Acute Ischemic Stroke (CATIS) Trial studied 4,071 people who suffered a [stroke](#) related to a clot (as opposed to one caused by bleeding) and had high blood pressure when they presented to the hospital. Half of the patients were randomly assigned to get blood pressure-lowering medication and the other half assigned to discontinue their home antihypertensive medications within 48 hours of their stroke. Both groups received standard stroke care.

Within 14 days of stroke or at hospital discharge, 33.6 percent of the patients in each group had died or experienced a major disability.

At three months, the rate was 25 percent for each group. The rate was lower after three months because fewer patients continued to have a major disability as time passed.

"We were surprised that [lowering blood pressure](#) during this most acute phase of the stroke made no difference in patient outcomes," said Jiang He, M.D., Ph.D., the study's lead author and professor of epidemiology and medicine at Tulane University Health Science Center in New Orleans. "Lowering blood pressure is known to prevent strokes. But in

this study, we saw no difference by treating high blood pressure early after stroke."

The rate of negative side effects was also similar with or without [high blood pressure](#) treatment.

"The data suggests that during the acute phase of ischemic stroke, treatment of hypertension should be individualized by the physician based on the patient's clinical conditions," said He, chair of the Department of Epidemiology in the Tulane University School of Public Health and Tropical Medicine.

Lowering [stroke patients'](#) blood pressure in the long term is recommended to prevent additional strokes. But there are no guidelines on lowering blood pressure immediately for most people having a stroke, unless their [blood pressure](#) is extremely high, He said.

While the investigation took place in China, the results might apply to stroke patients in the United States and worldwide, he said.

"We need to look at the long-term impact, too, not only death and major disability, but other things such as cognitive functional impairment and quality of life," He said.

Provided by American Heart Association

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