

BP-lowering therapy reduces stroke, death in grade 1 HTN

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active groups, withdrawal from treatment due to adverse events was more common.

"Blood pressure-lowering therapy is likely to prevent stroke and death in patients with uncomplicated grade 1 hypertension," the authors write.

The BPLTTC received funding from several pharmaceutical companies.

More information: <u>Full Text</u> Editorial (subscription or payment may be required)

(HealthDay)—For patients with grade 1 hypertension, blood pressure-lowering therapy is associated with a reduction in blood pressure and a lower likelihood of stroke and death, according to research published online Dec. 23 in the *Annals of Internal Medicine*.

Johan Sundström, M.D., Ph.D., from Uppsala University in Sweden, and colleagues examined whether pharmacologic blood pressure reduction prevents <u>cardiovascular events</u> in patients with grade 1 <u>hypertension</u>. Individual-patient data were included from Blood Pressure Lowering Treatment Trialists' Collaboration (BPLTTC) and other trials for patients without <u>cardiovascular disease</u> with blood pressures in the grade 1 hypertension range (140 to 159/90 to 99 mm Hg). Participants were randomized to receive an active or control blood pressure-lowering regimen.

The researchers found that the average reduction in <u>blood pressure</u> was about 3.6/2.4 mm Hg. The odds ratios were 0.86 (95 percent confidence interval [CI], 0.74 to 1.01) for total cardiovascular events; 0.72 (95 percent CI, 0.55 to 0.94) for strokes; 0.91 (95 percent CI, 0.74 to 1.12) for coronary events; 0.80 (95 percent CI, 0.57 to 1.12) for heart failure; 0.75 (95 percent CI, 0.57 to 0.98) for cardiovascular deaths; and 0.78 (95 percent CI, 0.67 to 0.92) for total deaths over five years. In the

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