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DOXAZOSIN THERAPY IN MILD HYPERTENSION PATIENTS CONCOMITANT WITH BPH/LUTS

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Objectives Lower urinary tract symptoms (LUTS) resulting from benign prostatic hyperplasia (BPH) are highly prevalent in the aging male population and cause substantial adverse effects on health. There are strong evidences from multiple epidemiological studies that LUTS and hypertension are correlated. BPH/LUTS and hypertension are often coexist in the older men. Men with bothersome LUTS may predispose patients to present with various conditions including hypertension, depression and so on. Severe LUTS are likely to constitute a risk factor for the development of hypertension. $\alpha(1)$ -blockers initially introduced for the management of hypertension and have become first-line medical therapy options for BPH/LUTS. This study was conducted to describe the efficacy of the daily therapy, doxazosin as an $\alpha(1)$ -blocker, on BPH/LUTS in men with mild hypertension.

Objectives To evaluate the safety and the therapeutic efficacy of doxazosin for mild hypertension patients with BPH/LUTS.

Methods A total of 52 mild hypertension patients concomitant with BPH/LUTS (International Prostate Symptom Score-IPSS>7) at the first visit in our clinic were enrolled in this trial. They were assessed based on IPSS and IPSS-Quality of Life for BPH/LUTS and measurement of blood pressure (BP) in the patients with mild hypertension after excluding those with normotensive and moderate-to-severe hypertension. They were treated with 4 mg of doxazosin once daily for 12 weeks. IPSS, IPSS quality of life, BPH Impact Index and BP measurement were evaluated every 4 weeks. Safety was mainly assessed via spontaneous reports of adverse events.

Results After 12 weeks of the medication, changes in IPSS in mild hypertension men concomitant with BPH/LUTS were significantly different before and after treatment (12.6 ± 3.8 vs 8.1 ± 2.6 , $p < 0.01$). Doxazosin demonstrated efficacy in lowering the score for IPSS and relieving LUTS. Of them, systolic and diastolic blood pressure of 39 patients (75.0%) decreased to normal. Doxazosin was generally well tolerated. No orthostatic hypotension and other blood pressure-related adverse profiles occurred in all patients.

Conclusions Doxazosin therapy appears to be efficacious in both relieving LUTS and decreasing blood pressure in mild hypertension men concomitant with BPH/LUTS.