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EFFICACY AND TOLERABILITY OF AMLODIPINE/TELMISARTAN COMBINATION THERAPY IN HYPERTENSIVE PATIENTS WITH CARDIOVASCULAR RISK FACTORS

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¹孙慧, ²赵勇. ¹济南市中心医院; ²山东省立医院

Objectives Most patients with hypertension require more than one drug to attain recommended blood pressure (BP) targets. Initiating therapy with two agents is recommended for patients at high risk of a cardiovascular event or with a Bp >20/10 mm Hg above goal. **OBJECTIVE:** To demonstrate the efficacy and tolerability of amlodipine/telmisartan combination therapy in hypertensive patients with cardiovascular risk factors.

Methods After a washout period of 2 week, all patients with mean sitting systolic blood pressure (MSSBP) of 140–179 mm Hg and/or mean sitting diastolic blood pressure (MSDBP) of 90–109 mm Hg were randomised to receive a design to the two treatment comparisons: amlodipine 2.5 mg once daily (o.d.) and amloride/hydrochlorothiazide 1.25/12.5 mg o.d (Group A) or amlodipine 2.5 mg o.d and telmisartan 40 mg o.d. (Group B). Following the initial 2 week treatment period, patients were force titrated to amlodipine/telmisartan 5/80 mg o.d. or amlodipine/amloride/hydrochlorothiazide 5/2.5/25 mg o.d for the remainder of the trial. Primary efficacy variable was change from baseline in MSSBP and MSDBP at study end. Secondary efficacy variables included control rate (MSSBp <140 mm Hg and MSDBp <90 mm Hg). Safety was also assessed.

Results 54 (mean age: 59.5 years) were randomised. Statistically significantly greater reductions in MSSBP/MSDBP were observed in both group A (21.3/15.8 mm Hg, $p<0.0001$) and group B (21.6/16.1 mm Hg, $p<0.0001$). Control rates were higher in both combination therapy groups (99% and 94.5%, respectively). Peripheral oedema was the most frequent adverse event, reported in group A (4.5%) and group B (4.7%). No patient was discontinued due to edema.

Conclusions The combination of amlodipine/telmisartan in this 52-week study provided additional BP control and was well-tolerated in patients with cardiovascular risk factors. Clinically significant and persistent reductions in blood pressure were achieved.