

Diabetes Makes Hypertension Harder to Control

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In some people high blood pressure can be controlled with a single drug, while others may need three or more. The height of the blood pressure is only one of the factors that determine this, and little is known about what the others are. A large study called INSIGHT has enabled this question to be looked at. Patients were treated with either a calcium channel blocker (nifedipine) or a diuretic, and then a beta blocker (atenolol) or an ACE inhibitor added if the pressure remained elevated. The number of patients was large (5,669), and the treatment schedule was tightly controlled, so that it was possible to examine a number of factors which might predict how easily the blood pressure could be controlled.

The blood average blood pressure was 172/99 mmHg at the start of the study, and 139/82 at the end. About a quarter of the patients had diabetes as well as hypertension. The diabetics started and finished with higher blood pressures than the others, and more of them required a second drug to control the blood pressure (35% versus 28%). One other factor that appeared to influence the ease of controlling the blood pressure was systolic hypertension (a diastolic pressure less than 90 mmHg) as compared to diastolic hypertension (diastolic above 90). Patients with systolic hypertension needed slightly *less* drugs to control their pressure (27% needed a second drug, as compared to 31% of those with diastolic hypertension). Some other factors were looked at, but they did not affect the ease of controlling the blood pressure; they included age, gender, smoking, high cholesterol, and the presence of atherosclerosis. The diastolic pressure tended to fall a little more in women and in older patients, however.

Source: MJ Brown and colleagues. Influence of diabetes and type of hypertension on response to antihypertensive treatment. *Hypertension* 2000; 35: 1038.