EFFECTIVENESS AND SAFETY OF ANTIHYPERTENSIVE DRUGS IN ELDERLY PATIENTS

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Background
Older hypertensive patients should attempt lifestyle modification to lower the blood pressure. If goal blood pressure is not attained with lifestyle modification, antihypertensive therapy should be initiated.

Purpose
To evaluate the effectiveness and safety of antihypertensive drugs in institutionalized older hypertensive patients.

Materials and Methods
Retrospective descriptive study including all older patients treated with antihypertensive therapy that lived in a public elderly residence. Follow-up was three months (February-May 2014). Analyzed parameters were: systolic blood pressure (SBP) and diastolic (DBP), kind of hypertension, cardiovascular risk factors (CVRF), vascular and/or organ injury, creatinine and potassium. The collected data were obtained by Savac® (prescription and validation program) and clinical records.

Results
A total of 141 residents were included 74 hypertensive patients (52.48%). The mean value of SBP was 122.6 mmHg (160-80) and DBP was 65.37 mmHg (89-49). The 97.3% had primary hypertension.

• The 44.6% of patients were treated with only one antihypertensive but the 21.6% and 6.7% were treated with four and five antihypertensive drugs.
• According to ESH/ESC Guidelines 2007, prescriptions were adjusted in the left ventricular hypertrophy, failed renal and diabetes mellitus (88.89%, 76.92% and 63.64% respectively).
• The effectiveness was 84.85% with one antihypertensive, 70% with two, 68.8% with three and 40% with four.
• The adverse effects were 41.8% orthostatic hypotension, 10.81% dizziness and 10.81% hyperkalemia.

CONCLUSION
THE ANTIHYPERTENSIVE THERAPY IN THE ELDERLY WAS EFFECTIVE AND CLINICAL TRIALS HAVE CONSISTENTLY DEMONSTRATED BENEFIT, INCLUDING PATIENTS OVER THE AGE OF 80 YEARS1,2. HOWEVER, THE ORTHOSTATIC HYPOTENSION WAS HIGHER THAN OTHERS STUDIES (41.8% VS 20%)1,3 AND THE DOSES HAVE TO BE REVISED.


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