

Hot from the hypertensive press

Short analysis of clinical studies that may change our practices in the field of hypertension 06/2021

Tackle resistant hypertension with a Swiss antihypertensive winning strategy

Among the various causes for uncontrolled blood pressure, the lack of adherence to antihypertensive treatment has been emphasized in the recent European guidelines on hypertension especially in patients with apparent resistant hypertension (1).

In a Swiss multicentric observational study including patients with residual hypertension on 24h ambulatory blood pressure monitoring despite ≥ 3 antihypertensive drugs, the authors show that a strategy combining a standardized triple antihypertensive therapy (olmesartan/amlodipine (40/10mg) + chlorthalidone (25mg) with electronic monitoring of adherence (MEMS®) normalizes systolic ABP in more than half of these patients after 3 months. Adherence to the daily antihypertensive drugs higher than 90% was associated with a better 24-h systolic and diastolic BP control.

This strategy enables to identify patients who need investigations for secondary forms of hypertension from those who need a long term support of their adherence.

- (1) 2018 ESC/ESH Guidelines for the management of arterial hypertension. Task force for the management of arterial hypertension of ESC/ESH. *Eur Heart J* 2018
- (2) Polychronopoulou, E., M. Burnier, G. Ehret, R. Schoenenberger-Berzins, M. Berney, B. Ponte, P. Erne, M. Bochud, A. Pechère-Bertschi and G. Wuerzner (2021). "Assessment of a strategy combining ambulatory blood pressure, adherence monitoring and a standardised triple therapy in resistant hypertension." <u>Blood Pressure</u>: 1-9. https://doi.org/10.1080/08037051.2021.1907174

Prof. Antoinette Pechère, Swiss Society of Hypertension

08.07.2021