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Perindopril in Elderly Hypertensives

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The aim of the present study was to evaluate the efficacy for 24 hours, the safety and the effects on carbohydrates, lipid metabolism and renal function of once-daily dosing of Perindopril (P) an angiotensin-converting enzyme inhibitor, on a population of elderly hypertensives.

Methods: 20 elderly hypertensives (8 M and 12 F; mean age 74 ± 3.8 years) with mild to moderate essential hypertension (diastolic blood pressure ≥ 95 mmHg after 3 separate clinic visits) after a two-week wash-out period received P 2 mg/day for 6 weeks. In 14 patients (pts) in whom supine diastolic blood pressure (DBP) remained >95 mmHg, the daily dose was raised to 4 mg. All pts underwent ABPM at the end of the wash-out period and at the end of 6 weeks of active treatment. Serum glucose, triglycerides, total cholesterol, HDL and LDL cholesterol and renal function were also evaluated.

Results: The therapeutic goal (DBP <95 mmHg or a 10% DBP reduction) was achieved with P 2 mg in 6 cases (ABPM: DBP 24/h from 92.3 ± 8.5 to 70.3 ± 5.6) and with P 4 mg in 10 (ABPM: DBP 24/h from 96.5 ± 10.3 to 74.2 ± 6.2). The haematological and biochemical parameters considered showed no significant changes and no significant variation of renal function occurred.

Conclusion: Perindopril as a monotherapy at a dosage of 2 and 4 mg/day is well-tolerated and effective in lowering blood pressure in elderly hypertensives throughout the day and night.

Key Words: **Perindopril, Elderly, ABPM**