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XIII МЕЖДУНАРОДНЫЙ КОНГРЕСС

# «КАРДИОЛОГИЯ НА ПЕРЕКРЕСТКЕ НАУК»

# СБОРНИК ТЕЗИСОВ

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ТЮМЕНСКИЙ КАРДИОЛОГИЧЕСКИЙ НАУЧНЫЙ ЦЕНТР

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РОССИЙСКОЕ ОТДЕЛЕНИЕ МЕЖДУНАРОДНОГО ОБЩЕСТВА ПО СЕРДЕЧНО-СОСУДИСТОМУ УЛЬТРАЗВУКУ

МИНИСТЕРСТВО НАУКИ И ВЫСШЕГО ОБРАЗОВАНИЯ РОССИЙСКОЙ ФЕДЕРАЦИИ

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# СБОРНИК ТЕЗИСОВ

## XIII МЕЖДУНАРОДНОГО КОНГРЕССА «КАРДИОЛОГИЯ НА ПЕРЕКРЕСТКЕ НАУК»

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# LERCANIDIPINE IN PATIENTS WITH ISOLATED SYSTOLIC HYPERTENSION

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According to the results of the Framingham study, isolated systolic hypertension (ISH) accounts for more than two-thirds of cases of hypertension in the elderly. The reason for therapy in elderly patients with isolated systolic hypertension is the fact that the risk of myocardial infarction, left ventricular hypertrophy, chronic renal failure, stroke, and mortality as a result of cardiovascular diseases increases 2-4 times.

Calcium channel blockers – first–line drugs in the treatment of ischemic heart disease in elderly patients, the effectiveness and safety of which has been proven by the results of many large studies - are capable not only of reducing blood pressure, but also of having a certain organoprotective effect, thereby leading to a significant reduction in cardiovascular morbidity and mortality.

The aim of the study was to evaluate the effectiveness of the 3rd generation calcium channel blocker lercanidipine in patients with isolated hypertension of middle and elderly age.

**Materials and methods:** 37 patients with ISH – 21 (57.1%) men and 16 (42.9%) women aged 40-75 years were examined. All patients were conditionally divided into two clinical groups equal in number of patients. The 1st clinical group included 16 patients with ISH aged 40-59 years (on average (50.5 ± 1.5) years). The 2nd clinical group consisted of 21 patients with ISH aged 60-75 years (on average (68.5±2.5) years). The systolic pressure level in patients of the 1st clinical group averaged (158.52±5.24) mmHg, in patients of the 2nd clinical group - (160.58±5.64) mmHg.

Patients of both clinical groups received lercanidipine at a dose of 10 mg / day once and with insufficient efficacy of therapy after 10 days, the dose of lercanidipine was increased to 20 mg / day.The total duration of the study is 4 weeks. Statistical data processing was carried out using Microsoft Excel and Statistica software packages using the Student's t-test.

**Results of the study:** 4 weeks after the start of treatment in both groups of patients, a significant improvement in well-being was noted: a decrease in headaches and dizziness, hypertensive crises stopped, and exercise tolerance increased.

The average final dose of lercanidipine was in patients of the 1st clinical group (12.5 ± 2.5) mg, in patients of the 2nd clinical group - (13.5± 2.6) mg. 4 weeks after the start of treatment, the target level of systolic pressure (less than 140 mmHg) was reached, respectively, in 11 (73.3%) and 15 (75%) patients. The indicators of the daily blood pressure profile have significantly improved. The improvement of the parameters of the daily blood pressure profile was expressed in a decrease in the level of daily systolic pressure in patients of the 1st and 2nd groups - by 17.7 and 17.5%, respectively ($P<0.05$), as well as in a decrease in the level of daily diastolic pressure - by 11 and 11.0%, respectively ($P<0.05$). Along with the antihypertensive effect in patients of groups 1 and 2, respectively, by 28.0 and 23.7% ($P<0.05$), as well as systolic pressure variability - by 31.7 and 28.6%, respectively ($P<0.05$). A positive result of lercanidipine monotherapy is the revealed ability of the drug to normalize the daily blood pressure profile: systolic pressure in patients of the 1st and 2nd clinical groups increased by 39.7 and 37.8%, respectively ($P< 0.05$).

Thus, in patients with isolated middle-aged and elderly systolic hypertension, antihypertensive monotherapy with lercanidipine has a comparable antihypertensive effect, leads to normalization of the daily blood pressure profile with the achievement of the target level of systolic blood pressure in 73.3 and 75% of patients, respectively.

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