



The Medical **Bulletin**

In Hypertension

Hypertension-Intensive Treatment in Older People is not Needed

Intensive Blood Pressure Lowering in Older People with Hypertension: A Time-to-Benefit Analysis Paul S. Mueller, MD, MPH, FACP, reviewing Chen T et al. JAMA Intern Med 2022 May 9

One hundred patients would need treatment for 3 years to prevent one major adverse cardiovascular event.

Randomized trials have shown that intensive blood pressure (BP) control lowers risk for major adverse cardiovascular events (MACEs) in older adults. However, intensive BP control can cause adverse events (e.g., hypotension, syncope, falls, kidney injury, electrolyte disturbance). In this meta-analysis of six randomized clinical trials that involved 27,400 participants (age, ≥ 60 ; mean age, 70) with hypertension, researchers estimated the time to benefit of intensive BP lowering. Intensive BP lowering (defined by these authors as lowering systolic BP < 140 mm Hg) was associated with a significant 21% lower relative risk for MACEs. Five hundred patients with hypertension would need intensive BP-lowering treatment for 9 months to prevent one MACE, or 100 patients would need treatment for 34 months to achieve this result.

COMMENT The authors conclude that lowering BP to < 140 mm Hg in older patients with hypertension would be most suitable for those with a life expectancy of > 3 years and inappropriate for those with a life expectancy of < 1 year. For the individual patient, these results should inform decision making regarding the potential merits of the intensity of BP lowering in preventing MACEs versus the possibility of harm.

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