



## NEWS RELEASE

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### **DIURETICS FOUND TO BE UNSURPASSED IN PREVENTING HYPERTENSION COMPLICATIONS IN BLACK PATIENTS – EVEN THOSE WITH THE METABOLIC SYNDROME**

*July 17, 2005. San Juan, Puerto Rico.* In the continued quest to find cost-effective treatment for high blood pressure, today's announcement from ISHIB2005 brings medical practice one step closer to achieving blood pressure control, even in high-risk patients.

In research presented from the ALLHAT Collaborative Group, diuretics were found to be more effective in preventing other clinical outcomes, especially heart failure, in all patients regardless of presence or absence of metabolic syndrome.

Metabolic syndrome is a cluster of disorders that, when combined, places a patient at higher risk for cardiovascular disease. Research has referred to the syndrome as a deadly quartet of obesity, high insulin levels, abnormal cholesterol levels and high blood pressure.<sup>1</sup> When found together, these conditions increase the patient's likelihood for developing diabetes, heart disease or stroke. At the same time, metabolic syndrome is extremely common among African-American women and Mexican-American men and women.<sup>2</sup>

The new study provides practical treatment options for these high-risk patients. According to Jackson T. Wright, Jr., MD, PhD, lead presenter of the study and professor of medicine at Case Western Reserve University School of Medicine, "Diuretic therapy remains preferred over ACE inhibitors or calcium channel blockers, as the initial antihypertensive medication, even in the presence of metabolic syndrome in African-American hypertensives."

To reach this conclusion, the ALLHAT Group analyzed data from the largest randomized, double-blind, active-controlled clinical trial of more than 42,000 hypertensive participants including more than 15,100 Blacks from the US, Canada, US Virgin Islands, and Puerto Rico. Patients were randomly assigned to either chlorthalidone (diuretic); amlodipine (calcium channel blocker); or lisinopril (ACE inhibitor); almost 30,000 cases were examined in this report. Researchers examined the results of these agents on cardiovascular and renal complications on the more than 18,100 participants with metabolic syndrome (of whom 5,763 were Blacks) and 11,180 participants without metabolic syndrome (of whom 4,277 were Blacks). This report represents the largest comparison of antihypertensive drug therapy on clinical outcomes in Black and non-Black hypertensives with metabolic syndrome.

After 4.9 years of treatment, the primary outcome of combined fatal coronary heart disease and non-fatal myocardial infarction and other cardiovascular outcomes were examined. Despite expected differences on blood glucose, lipids, and potassium in Blacks with and without metabolic syndrome, neither the calcium channel blocker nor the ACE inhibitor was more effective than the diuretic in preventing any cardiovascular outcome, including atherosclerotic events. In fact, the diuretic was more effective than both agents in preventing heart failure and also more effective than the ACE inhibitor in preventing stroke in Blacks with this disorder. Importantly, these results held for Black hypertensives with the metabolic syndrome with or without diabetes.

The Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial (ALLHAT) was a practice-based clinical trial sponsored by the National Heart, Lung, and Blood Institute (NHLBI). The trial was conducted in more than 600 office-based practices and general medical and specialty clinics throughout the United States, Puerto Rico, the US Virgin Islands, and Canada. Patients, a large percentage of whom were African-American, were enrolled between February 1994 and January 1998. The full-scale trial began in fall 1994 and continued for eight years until March 31, 2002.<sup>3</sup>

*These research findings were presented at ISHIB2005. The abstract was a blue ribbon presentation during ISHIB2005 Plenary Session II at 8:30 AM. ISHIB2005, an annual gathering of healthcare professionals from around the world, is jointly sponsored by the nonprofit ISHIB and ASH (American Society on Hypertension) and is taking place at the Caribe Hilton Hotel in San Juan, Puerto Rico during July 15-18.*

*ISHIB (the International Society on Hypertension in Blacks) is a unique professional medical membership organization devoted to improving health and life expectancy of ethnic populations. ISHIB was founded in Atlanta, Georgia, in 1986 to respond to the problem of high blood pressure among ethnic populations. Each year, its international interdisciplinary conference presents advancements in the treatment and prevention of diseases concomitant to hypertension. In addition to US conference locations, other sites for the conference have included Toronto, London, the US Virgin Islands, Kenya, Cameroon and Brazil.*

## **References**

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2. Ford ES, Giles WH, Dietz WH. Prevalence of the metabolic syndrome among US adults: findings from the Third National Health and Nutrition Examination Survey. *JAMA*. 2002;287:356-359.
3. *Facts about ALLHAT*. Department of Health and Human Services. National Institutes of Health. National Heart, Lung and Blood Institute. Available at <http://www.nhlbi.nih.gov/health/allhat/>. Accessed on June 8, 2005.