Diabetes Didn’t Alter Benefit in Hypertension Trial

COPENHAGEN — Nondiabetic and diabetic patients benefit equally from the hypertension-lowering effects of an amiodipine/ perindopril regimen, according to a subanalysis of a large cardic outcome reported at the annual meeting of the European Association for the Study of Diabetes. The Anglo-Scandinavian Cardiac Outcomes Trial—Blood Pressure Lowering Arm (ASCOT-BPLA) was stopped early because of the distinct advantages of the calcium channel blocker/ACE inhibitor combination over a traditional beta-blocker (atenolol)/thiazide diuretic (benzofurhemizide) combination (Lancet 2005; 366:989–90).

Several subgroups were seen in reduced fatal and nonfatal stroke, cardiovascular events and procedures, and all-cause mortality. In the overall ASCOT-BPLA cohort of more than 19,000 hypertensive patients, the amiodipine-based regimen also resulted in a significant reduction in new-onset diabetes.

The current analysis included a subset of 5,137 trial participants who had pre-existing diabetes and found similar benefits for the amiodipine-based therapy, reported an investigator from Karolinska University Hospital in Stockholm. At the end of 5 years, total cardiovascular events and procedures were reduced by 14% in the amiodipine-treated group compared with the atenolol-treated group.

This is almost exactly the same reduction as what we found in the larger study of nondiabetic subjects, where we saw a 16% reduction,” said Dr. Östergren. Specifically, the incidence of fatal and nonfatal stroke and all-cause mortality was 48% lower, and non-coronary revascularization procedures were 57% lower.

**Patients with Nondiabetic and Diabetic Diabetes**

**ASCOT-BPLA**

**Diabetes**

**By Kate Johnson**

**Montreal Baruch**

**ABSTRACT**

Diabetic patients benefit equally from the hypertension-lowering effects of an amiodipine/perindopril regimen, according to a subanalysis of a large cardic outcome reported at the annual meeting of the European Association for the Study of Diabetes.

**METHODS**

The Anglo-Scandinavian Cardiac Outcomes Trial—Blood Pressure Lowering Arm (ASCOT-BPLA) was stopped early because of the distinct advantages of the calcium channel blocker/ACE inhibitor combination over a traditional beta-blocker (atenolol)/thiazide diuretic (benzofurhemizide) combination (Lancet 2005; 366:989–90).

**RESULTS**

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**DISCUSSION**

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