Importance of Blood Pressure Control in Hypertensive Patients With Coronary Heart Disease in Clinical Practice to Reduce the Risk of Stroke

To the Editor:

We wish to comment on the manuscript of Coca et al about which factors may influence the stroke risk among patients with coronary artery disease.1 For this purpose, data from the 22,576 patients enrolled in the INternational VErapamil SR-trandolapril STudy (INVEST) were used. Interestingly, excellently blood pressure control was achieved, at 24 months, 70% of patients attained values <140/90 mm Hg during 61,835 patient-years of follow-up. At the study end, 377 patients had a stroke (6.1 strokes/1000 patient-years) and 28% of those patients had a fatal stroke. Increased age, black race, US residency, and history of prior myocardial infarction, smoking, stroke/transient ischemic attack, arrhythmia, diabetes, and coronary bypass surgery were associated with an increased risk of stroke. As expected, achieving a systolic blood pressure <140 mm Hg and a diastolic blood pressure <90 mm Hg was associated with a decreased risk of stroke. As authors remarked, these results strongly support the importance of reducing blood pressure to <140/90 mm Hg for stroke prevention in patients with coronary artery disease.

Although information given by controlled randomized trials is very important, it is not always reliable to clinical practice. Clinical trials are somehow selective, and sometimes significant differences remain between randomized trials and the “real world” of clinical practice.2–4 Although there are several causes to explain this difference, the more strict follow-up, the more favorable clinical profile and the major motivation of the patients to take the medication may be potential reasons that result in a better blood pressure control in these studies.5

Because blood pressure control is crucial to decrease the stroke risk, especially in those populations at highest risk such as those patients with hypertension and coronary artery disease, it seems necessary to explore the real blood pressure control in these patients.6

In this study, a total of 2024 patients with hypertension and chronic ischemic heart disease attended in cardiologic outpatient clinics. The CINHTIA study. Rev Clin Esp. 2008;400–404.

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