Delays in intensifying antihypertensive therapy can increase the risk of cardiovascular events

Delays in adding antihypertensive medications or increasing the dose of existing medications can increase the risk of acute cardiovascular events and death (Xu W, Goldberg SI, Shubina M, et al. BMJ 2015; 350:h158).

A study conducted in primary care practices in the UK assessed the impact on cardiovascular outcomes of different antihypertensive treatment strategies in 88,756 adults over a 10-year treatment period. The treatment strategies were defined according to systolic blood pressure targets, time to intensification of medication management and time to follow-up after intensification. Patients with a systolic blood pressure target above 150 mm Hg had an increased risk of acute cardiovascular events or death, compared with treatment intensification thresholds of 150 mm Hg or lower which were associated with progressively reduced risk (down to a minimum threshold of 130 mm Hg). Delays of greater than 1.4 months before intensification of antihypertensive treatment ($P = 0.009$), or delays greater than 2.7 months in follow-up of blood pressure after treatment intensification ($P < 0.001$) were associated with increased cardiovascular risk. These findings demonstrate that timely changes to medication management and follow-up to achieve blood pressure targets can reduce the risk of cardiovascular events and death in patients with high blood pressure.