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cantly reduced blood pressure and the effects persisted over 24 hours, one study found, he said.

A metaanalysis of studies on diabetic patients found that walking as little as 2 hours or more each week reduced mortality by about 40%, compared with less active patients, Dr. Kaplan said.

► **Sodium reduction.** Patients who reduce their sodium intake typically return to old habits over time. The result is that

Blood Pressure Improved With Home Monitoring

SAN FRANCISCO — New data for the first time support assumptions that home monitoring improves blood pressure control because of better adherence to antihypertensive therapy, Gbenga Ogedegbe, M.D., said at the annual meeting of the American Society of Hypertension.

Previous reports showed better control in hypertensive patients performing home blood pressure monitoring, compared with patients monitored in physicians' offices; clinicians assumed this was due to better adherence to home monitoring therapy.

The current data—part of a larger and longer study—came from patients with uncontrolled blood pressure on one or more antihypertensive medications who were randomized to home blood pressure monitoring (118 patients) or usual care in offices (60 patients) for 12 weeks. Investigators assessed adherence to therapy using the well-validated Morisky questionnaire, said Dr. Ogedegbe of Columbia University, New York.

At baseline, 47% of patients in the home monitoring group and 65% in the usual care group reported adherence to therapy, a non-statistically significant difference.

In the home monitoring group, patients took their blood pressure three times per week on average, usually at different times of the day, using a "life-link" monitoring system that gave them immediate feedback on their blood pressure and electronically sent a report to their physicians.

At follow-up 12 weeks later, patients were asked four questions that have been shown to predict the likelihood of blood pressure control: In the past 4 weeks, have you been careless about taking your blood pressure medication? In the past 4 weeks, have you forgotten to take your blood pressure medication? Do you stop taking the medication when you feel better? Do you stop taking the medication when you feel worse, from side effects? Patients who answered "yes" to any of the questions were considered nonadherent to therapy.

In the home monitoring group, 31% went from being nonadherent at baseline to adherent with therapy at 12 weeks, compared with 12% of patients in the usual care group, a significant difference.

Patients in the home monitoring group were less likely to move from adherent to nonadherent (12%), compared with the usual care group (18%). The rest of the patients did not change adherence patterns.

—Sherry Boschert

no difference is seen after 5 years, according to an analysis of about 30 studies.

People are surrounded by high-sodium foods in U.S. culture: Some fast food items pack 1,000-3,000 mg sodium each. "Most people have no perception of what they're eating when they eat this kind of food," he said.

► **Moderation of alcohol.** Drinking moderate amounts of alcohol while eating food

does not increase the risk of hypertension and may even provide some cardiovascular

benefits, he said. Consuming alcohol without food or having more than three drinks per day increases the risk for hypertension and other health problems.

► **Increasing potassium.** Hypertensive

patients can reduce their blood pressure by taking 40-80 mmol/day of supplemental potassium, but it's better to recommend

Studies comparing weight loss diets suggest that the cheapest and 'probably the most logical' method—Weight Watchers—may be the best diet strategy.

that patients eat more fruits and vegetables to boost their potassium intake. One reason the Dietary Approaches to Stop Hypertension diet works is that it triples the typical potassium intake, Dr. Kaplan noted.

► **Reducing caffeine.** Be aware that the first cup of the day causes a pressor effect in many people. Advise patients monitoring their blood pressure to check before and after drinking coffee or tea containing caffeine, he advised.

► **Calcium or magnesium.** These minerals, in the form of supplements, have no significant effect on hypertension, Dr. Kaplan said. ■

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Reference: 1. Data on file, Boehringer Ingelheim Pharmaceuticals, Inc.

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