Goodfellow Gems are chosen by Goodfellow Director, Bruce Arroll to be either practice changing or thought provoking. You are being mailed these as you are a member of the Goodfellow learning community.

BP 140 treated to 120: No increase in concern re falling

In an extra analysis of the SPRINT trial, where hypertensive patients were randomised to a treatment target of 140 mm Hg or 120 mm Hg, the concerns about falling were measured on the Efficacy Scale International questionnaire at baseline, six months, one year, and annually thereafter.¹

While there was an expected increase in falling concerns there was no difference between the groups randomised to 140 vs 120 mm Hg.

In the original paper there was a statistically significant increase in syncope but not in terms of injurious falls.² With older patients it's prudent to check their blood pressures sitting and standing but at the same time remembering that older patients have the highest CVD risk so treatment is a balance of benefit against harms.

References:

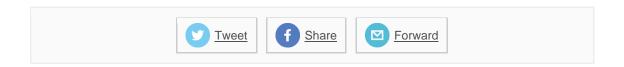
- Impact of Intensive Blood Pressure Therapy on Concern about Falling: Longitudinal Results from the Systolic Blood Pressure Intervention Trial (SPRINT). J Am Geriatr Soc (2019) <u>View here</u>
- A Randomized Trial of Intensive versus Standard Blood-Pressure Control.
 NEJM (2015) <u>View here</u>

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28th March



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