

High-blood-pressure treatment for the over-80s too aggressive, warns expert

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People over 80 years are being treated too aggressively for high blood pressure, warns an expert in an editorial in *BMJ Clinical Evidence* this week.

According to Dr James Wright, the latest evidence suggests that less aggressive drug therapy may be more effective at reducing mortality in this age group. Based on this evidence, he suggests clinicians change what they are presently doing and move towards a more conservative approach for people aged over 80.

Despite limited evidence about [high blood pressure](#) ([hypertension](#)) treatment in the over 80s, UK and US guidelines recommend that people over 80 should receive the same treatment as people of any other age. This means using combinations of drugs to reach a target [blood pressure](#) of 140/90 mmHg.

But could this be doing more harm than good, asks Wright?

He points to the results of a recently updated Cochrane review which suggest that our present approach may be "excessively aggressive."

This review includes data from two new trials which looked specifically at the effect of [antihypertensive drugs](#) in people over the age of 80. Interestingly, the only trial that found a significant reduction in mortality was the most conservative in terms of number of drugs and dose of drugs allowed. The treatment regime involved three easy steps, with a target

blood pressure of 150/80 mmHg.

Using this approach would require little adjustment of [drug doses](#) and would markedly simplify and reduce the cost of managing these patients, says Wright.

However, he points out that only half of the people on this regimen would achieve a target blood pressure of 150/80 mmHg. This is below recommendations set out for UK GPs in the Quality and Outcomes Framework (QOF), which suggest that 70% of all patients should meet treatment targets.

Trials are now needed to compare this conservative approach with the more [aggressive treatment](#) strategies in common use today, he writes. In the meantime, clinicians should change what they are presently doing and move towards a more conservative approach for people aged over 80.

Provided by British Medical Journal

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