

Risk for dementia reduced in association with antihypertensive use

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Antihypertensive use is associated with a reduced risk for dementia

compared with untreated hypertension, according to research published online Sept. 12 in *JAMA Network Open*.

Matthew J. Lennon, M.D., from the University of New South Wales in Sydney, and colleagues examined the associations of hypertension history, antihypertension use, and baseline-measured blood pressure (BP) in late life with dementia in longitudinal, population-based studies of aging adults participating in the Cohort Studies of Memory in an International Consortium group. The analysis included 17 studies with 34,519 community-dwelling [older adults](#) (mean age, 72.5 years) and a mean follow-up of 4.3 years.

The researchers found that individuals with untreated hypertension had a significantly increased risk for dementia compared with healthy controls and with individuals with treated hypertension in the main, partially adjusted analysis including 14 studies (hazard ratios, 1.42 and 1.26, respectively). The risk for dementia was not increased significantly for those with treated hypertension versus healthy controls. There was no variation observed in the association of antihypertensive use or hypertension status with dementia according to baseline BP.

"Antihypertensive use was associated with decreased dementia risk in late-life individuals with hypertension; thus, [dementia](#) risk reduction may be one of the multiple goals of antihypertensive treatment in late-life (e.g., prevention of ischemic heart disease, [chronic kidney disease](#))," the authors write.

More information: Matthew J. Lennon et al, Use of Antihypertensives, Blood Pressure, and Estimated Risk of Dementia in Late Life, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.33353](#)

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