

Drug may reduce coronary artery plaque

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Research presented at the 20th annual Transcatheter Cardiovascular Therapeutics (TCT) scientific symposium, sponsored by the Cardiovascular Research Foundation (CRF), suggests that olmesartan, a drug commonly used to treat high blood pressure, may play a role in reducing coronary plaque.

The trial, "Impact of OLmesartan on progression of coronary atherosclerosis; evaluation by IVUS [OLIVUS], was performed on 247 angina patients with native coronary artery lesions. Patients were randomly assigned to receive 20-40mg/day of olmesartan or control, and treated with a combination of β -blockers, calcium channel blockers, diuretics, nitrates, glycemic control agents and/or statins per physician's guidance.

Serial Intravenous Ultrasound (IVUS) examinations were performed to assess the amount of coronary plaque before and 14 months after the start of treatment.

At the start of the trial, patient characteristics and all IVUS measurements were identical between the two groups. However, after 14 months of treatment, IVUS showed significant decreases in measurements of plaque volume in the olmesartan group, despite similar blood pressure readings.

In addition, multivariate analysis identified olmesartan administration as one of the factors that caused the decrease in plaque volume.

"Management of plaque is a key front in the war on sudden heart attack," said Atsushi Hirohata, M.D, Ph.D, Cardiovascular Medicine, the Sakakibara Heart Institute of Okayama, Okayama, Japan and lead author of the study. "These results suggest a positive role in potential plaque regression through the administration of olmesartan, an angiotension-II receptor blocking agent, for patients with stable angina pectoris."

Source: Cardiovascular Research Foundation

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