

Take your blood pressure meds before bed

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It's better to take blood pressure-lowering medications before bed rather than first thing in the morning, according to a study appearing in an upcoming issue of the *Journal of the American Society Nephrology (JASN)*. The results indicate that heart conditions such as strokes and heart attacks can be drastically reduced in patients with hypertension with no extra effort or cost.

Provided by American Society of Nephrology

The time of day when patients take blood pressure-lowering medications can affect their blood pressure patterns, but does it make any difference to their health? Ramón Hermida, PhD (University of Vigo, in Spain) and his colleagues studied this question in a group of 661 patients who had chronic kidney disease and [hypertension](#). Half of the patients took all prescribed blood pressure-lowering medications first thing in the morning and half took at least one of them at bedtime.

After an average follow-up of 5.4 years, patients who took at least one blood pressure-lowering medication at bedtime had better control of their blood pressure and were about one-third as likely to experience a heart-related event such as a [heart attack](#), a stroke, or heart failure compared to patients who took their medications upon awakening. Also, sleep-time blood pressure was a much more accurate measure of heart health than wake-time blood pressure.

"Our results indicate that cardiovascular event rates in patients with hypertension can be reduced by more than 50% with a zero-cost strategy of administering blood pressure-lowering medications at bedtime rather than in the morning," said Dr. Hermida. "This study also documents for the first time that sleep-time [blood pressure](#) is the most relevant independent marker of cardiovascular risk," he added.

More information: The article, entitled "Bedtime Dosing of Antihypertensive Medications Reduces Cardiovascular Risk in CKD," will appear online on Monday, October 24, 2011, [doi:10.1681/ASN.2011040361](https://doi.org/10.1681/ASN.2011040361)

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