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Chronotherapy of the combined antihypertensive therapy - which the evidence?

Ana Luísa Matias(1), A Correia(2), S Almeida(3)

(1) UCSP Tarouca, Tarouca, Portugal

(2) UCSP Águeda, Águeda, Portugal

(3) USF Famílias, Lourosa, Portugal

Corresponding author: Dr Ana Luísa Matias, UCSP Tarouca, Family Medicine, Tarouca, Portugal. E-mail: alrmatias86@gmail.com

Background & Aim: Hypertension is a a risk factor for other diseases and it is a very common disease in Portugal. Given it high prevalence and insufficient control, different therapeutic strategies have been studied, as the combined use of antihypertensive agents drugs or taking them at night, as a possible influence of circadian rhythm in blood pressure modulators systems (BP) – Cronotherapy. bjective: Evaluate the evidence of Cronotherapy applied to anti-hipertensive combined therapy in the control of BP and in reduction of cardiovascular events.

Method: Systematic search in Medline and Evidence-based medicine websites of clinical guidelines, systematic reviews (SR), meta-analysis and randomised clinical trials (RCT), published between 2005 and 2015, in Portuguese, English and Spanish, using the MeSH terms: 'chronotherapy', 'hypertension', 'drug therapy, combination'. Assessment of levels of evidence (LE) and allocation of strength of recommendation (FR) through the Strength Range of Recommendation Taxonomy (SORT).

Results: Obtained 34 articles; the subsequent application of the selection criteria resulted in 2 articles: 1 SR and 1 RCT. The SR presented a significant reduction of BP, especially in non-dipper patients, with normalization of the BP circadian rhythm (LE 3). The RCT had demonstrated a greater reduction of BP and also of albuminuria with nocturnal versus diurnal intake. (LE 3). None of these articles studied outcomes of cardiovascular events.

Conclusions: Although the results showed a reduction of BP with the combined cronotherapy, the evidence found is insufficient to support or contradict its institution (FR C). Thus, studies of best quality are needed, with longer follow-up and patient-oriented, and not only to disease outcomes. The authors have no conflit interests.