THE ANTIHYPERTENSIVE PRACTICE IN HUNGARY

DATA FROM THE "LIVE BELOW 140/90 MMHG" PROGRAM

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In 2005 the Hungarian Society of Hypertension started a new program called "Live below 140/90 mmHg" for every hypertensive patients in Hungary.

The aim of this program to increase the hypertensive patients' concordance with a help of non-medical possibilities.

The data of the patients were collected into the Hungarian Hypertension Registry.

We analysed the data of participated patients in terms of antihypertensive therapy.

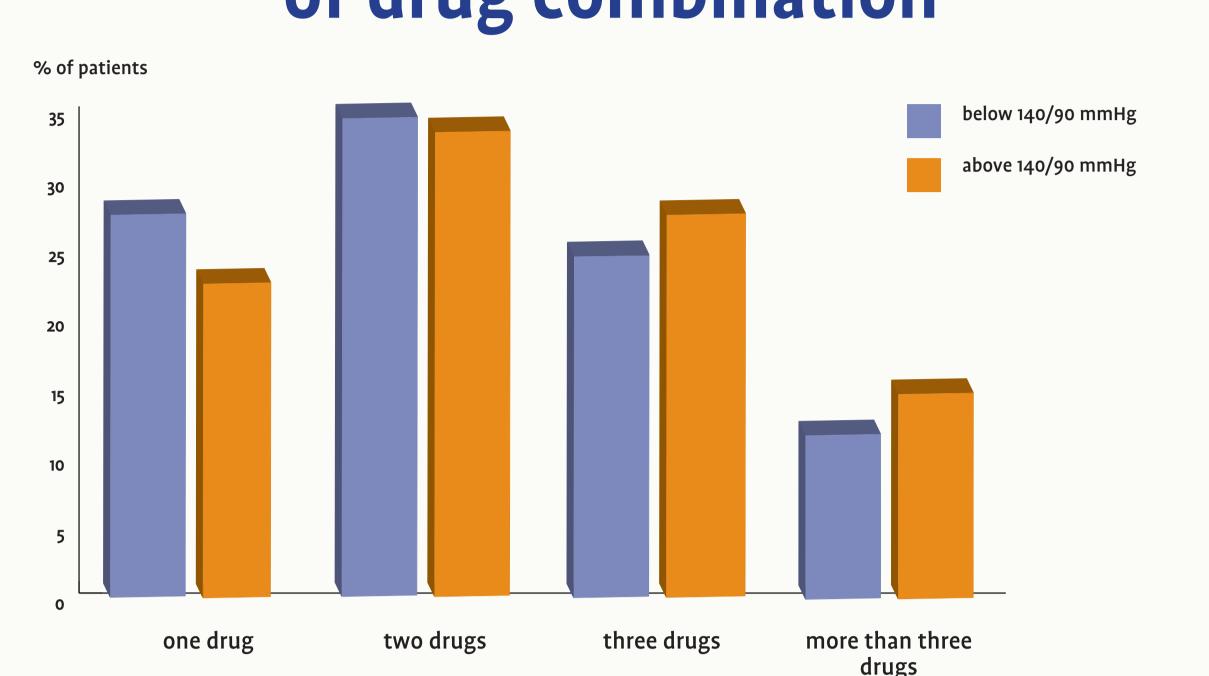
Patients' data

38372 patients participated in the program and their Registry's data were analyzed.

Average age of the patients was 61+ years, and more than 85% of the patients were above 50 years.

The target blood pressure (below 140/90 mmHg) was reached by 39% of the Hungarian hypertensive patients.

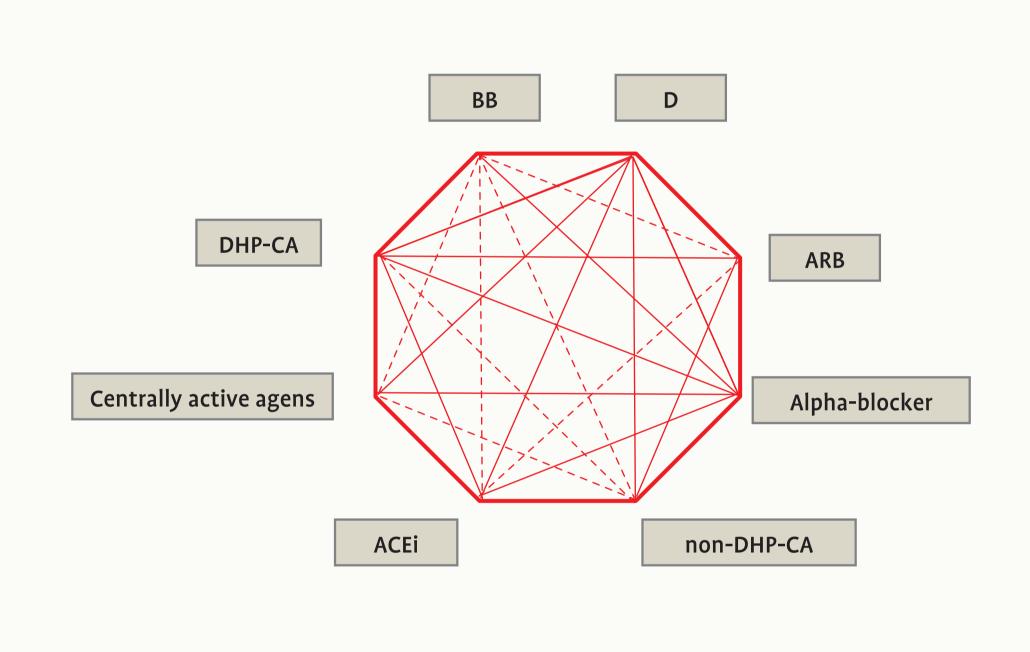
Proportion of the reached target blood pressure depending on the number of drug combination % of patients below 140/90 mmHg



Antihypertensive practice in Hungary-Hungarian Registry

	Percent of all patients	Mainly used agents
Diureticum (D)	34%	Hydrochlorothiazide, furosemide
Angiotensin converting enzyme inhibitor (ACEi)	56.5%	Enalapril, ramipril, perindopril
Angiotenzin receptor blocker (ARB)	13%	Valsartan, irbesartan
Calcium antagonist (CA)	35%	Amlodipin, lacidipine, felodipine, nifedipin retard
Beta blocker (BB)	43%	Metoprolol, bisoprolol,
Alfa-1 adrenerg receptor blocker	6%	Doxazosin, prazosin
Others (centrally active agent)	5%	Rilmenidin, moxonidin, guafacine

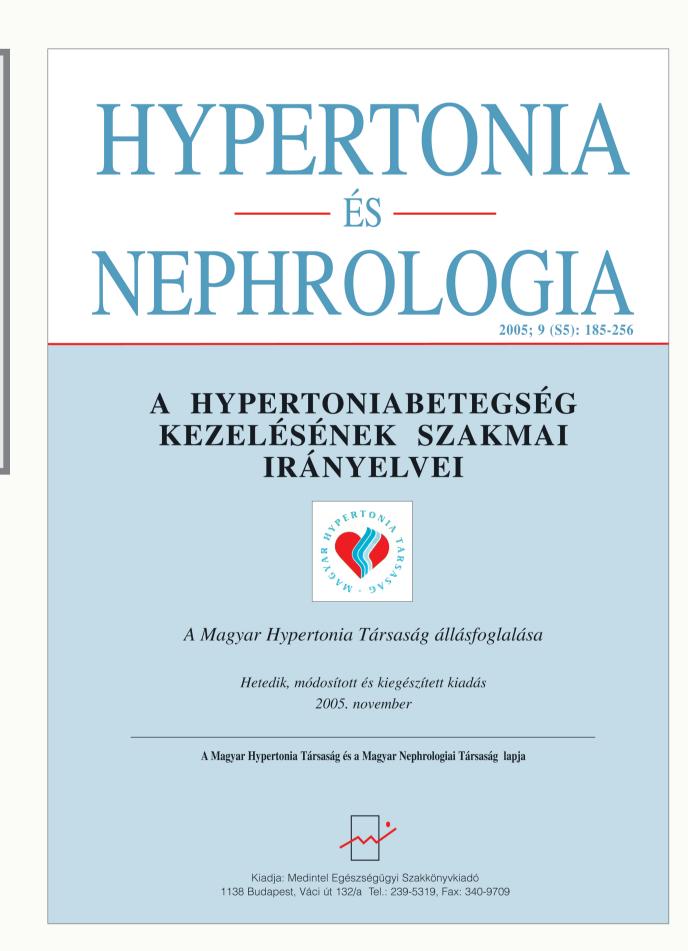
Possible combinations of the antihypertensive drugs: the Hungarian "octagon"



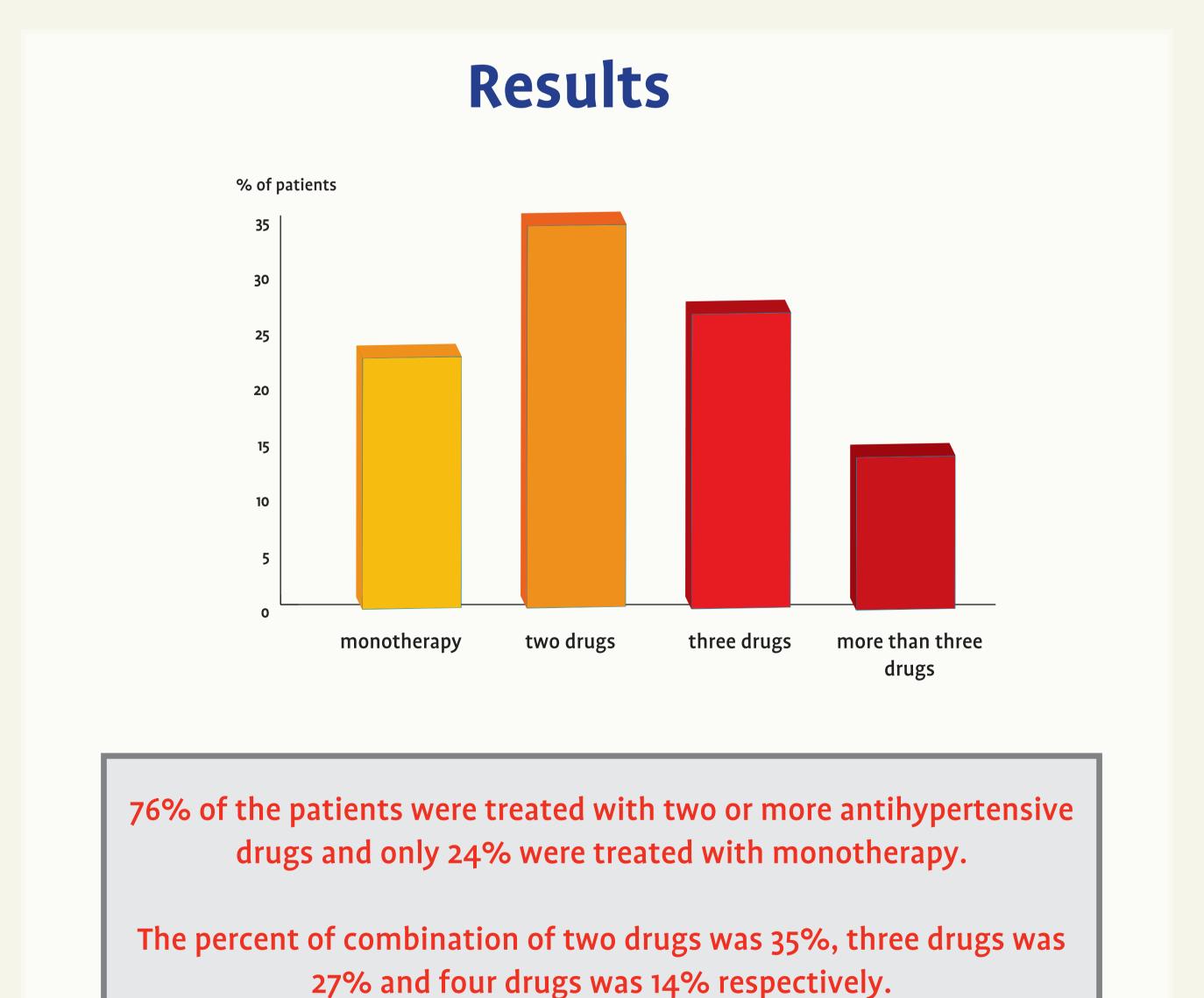
BB=beta blocker, D=diuretic, DHP-CA= dihydropyridine calcium antagonist, ARB= angiontensin type II receptor blocker, ACEi=angiotensin converting enzyme inhibitor

Hungarian Guideline

In the Hungarian practice we use the all antihypertensive drugs as used in Europe, based on the Hungarian Guideline of the hypertension management



Hungarian Guideline of the management of hypertension



Summary

Very low fixed combination of ACEi and CA was used, or BB and CA (relatively new drugs in Hungary) and relatively high of ACEi and hydrochlorothiazid was used.

For the effective blood pressure controll we need to use more aggressive therapeutical practice, mainly to change the number of drugs in combination.





