

Normohemodynamic Goal-Oriented Antihypertensive Therapy Improves The Outcome.

BB Sramek, JA Tichy, M Hojerova, V Cervenka

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Introduction

Normohemodynamic state involves a simultaneous normotension and normodynamic circulation. A noninvasive measurement of cardiac output and the hemodynamic management chart, which identifies the causes of abnormal hemodynamics (the percentage deviations in volume, inotropy, vasoactivity and chronotropy from their normal levels), were added to the noninvasive armament for treatment of hypertension and implemented into a

- The remaining 322 patients covered mild, moderate, and severe hypertension categories.
51 (15.9%) hypodynamic hypertensives
210 (65.2%) normodynamic hypertensives
61 (18.9%) hyperdynamic hypertensives
- All of the 322 hypertensives were then prescribed antihypertensive drugs, which generic categories were suggested by the System, as to aim for both normotension and normodynamic state.
- All patients were measured again in approximately 3 weeks.

Methods

- 383 randomly selected hypertensive patients (230 men & 153 women).
- Patients were previously treated by a conventional therapy of at least 2 antihypertensive drugs, between 2 and 42 years (mean 12.5 years).
- During the initial noninvasive hemodynamic assessment, 61 patients (15.9%) had their blood pressure within the normotensive range (MAP < 105 Torr) and were excluded from further participation in the study.

This percentage is consistent with the 5th Report of JNC on Detection, Evaluation & Treatment of Hypertension, 1993, NIH.

Result

- Though normotension could not be achieved previously by a conventional antihypertensive therapy in any of the 322 patients, the normohemodynamic goal-oriented therapy produced normotension in 203 of the patients (63%).
- In addition, 242 patients (75%) became normodynamic.
- This profound hemodynamic improvement took place in the first therapeutic iteration.

Conclusion

Instead of a conventional selection of antihypertensive drugs by trial-and-error, we were able to identify and administer such antihypertensive drug(s), which were optimal and specific for each patient.