

Lifestyle Can Rectify Some Prehypertension

BY SHARON WORCESTER
Southeast Bureau

NEW ORLEANS — Therapeutic lifestyle changes are effective for lowering blood pressure in individuals with prehypertension, but obese individuals may not derive maximum benefit, according to findings from a prospective study of nearly 2,500 patients who had prehypertension at baseline.

Of the 1,113 obese adults (body mass in-

dex greater than 30 kg/m²), 858 overweight adults (BMI 25-29.9 kg/m²), and 506 nonoverweight adults (BMI less than 25 kg/m²) who participated in a community-based therapeutic lifestyle changes (TLC) program, 952 (38%) experienced blood pressure normalization with the TLC program.

The blood pressure reductions were statistically significant in all groups, but the greatest reductions were seen in the nonoverweight subjects (average reduc-

tion of 10/8 mm Hg vs. 7/6 mm Hg for overweight subjects and 6/5 mm Hg for obese subjects), Dr. Barry A. Franklin reported in a poster at the annual meeting of the American College of Sports Medicine.

The greatest changes were seen in the nonoverweight group, despite significantly more weight loss in the obese subjects (6 pounds) and the overweight subjects (3 pounds), compared with the nonoverweight subjects (0 pounds), noted Dr.

Franklin of William Beaumont Hospital, Royal Oak, Mich.

Overall, the average resting blood pressure of the study population (125/79 mm Hg) decreased by 6/3 mm Hg. Systolic blood pressure decreased by 7 mm Hg in those with a baseline systolic blood pressure of 120-139 mm Hg, and diastolic blood pressure decreased by 6 mm Hg in those with a baseline diastolic blood pressure of 80-89 mm Hg. All the decreases were statistically significant.

The participants, who were not using any type of drug therapy to control blood pressure, were evaluated at baseline and after an average of 6 months of participation in the program, which involved exercise training, nutrition, weight management, stress management, and smoking cessation interventions.

The findings are important, Dr. Franklin said, because although guidelines promote therapeutic lifestyle changes as a cornerstone in the management of prehypertension, recent research that has focused largely on pharmacotherapy for prehypertension suggests that TLC is ineffective or inadequate.

These data show that TLC can be effective for managing prehypertension, which is a precursor of hypertension and a predictor of excessive cardiovascular risk, but they also suggest that there may be BMI-related differences in the responsiveness of blood pressure to TLC, he concluded. ■

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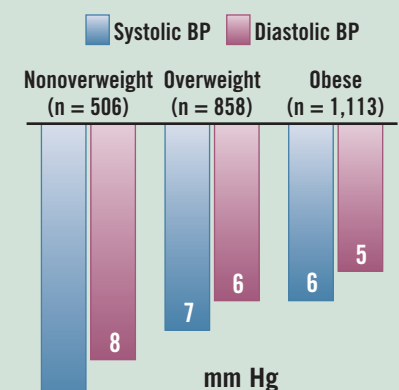
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Reduction in Blood Pressure from Therapeutic Lifestyle Changes



Note: Based on adults with prehypertension who participated for an average of 6 months.
Source: Dr. Franklin

ELSEVIER GLOBAL MEDICAL NEWS

'Stop Sudden Cardiac Arrest' Web Site

The Sudden Cardiac Arrest Coalition has launched a Web site with extensive information on SCA for public health advocates, the medical community, and the public, as well as links to more than 30 member organizations.

The site supports the coalition's goal of urging Congress and federal agencies to devote more resources to public awareness of SCA, research, and greater access to therapies. For more information, visit www.stopcardiacarrest.org. ■