



INTRODUCTION

Treating hypertension: comparing new and old agents

As new classes of antihypertensive agents have been developed over the last three decades, debate has arisen regarding the efficacy and appropriateness of older classes of antihypertensive agents in relation to newer classes of drugs that have appeared to induce fewer adverse metabolic and electrolytic adverse effects. There is no arguing the benefits of antihypertensive therapy in reducing cardiovascular morbidity and mortality. These benefits include reductions in stroke, congestive heart failure, and renal failure, but they also include a significant reduction in coronary mortality.

So far, only the oral diuretics and beta-adrenergic blockers have been subjected to extensive placebo-

controlled clinical trials to assess their efficacy in the management of hypertension. While we would expect newer classes of agents to have similar efficacy, carefully controlled clinical trials are needed to provide those assurances.

In the attached review, Dr. Marvin Moser addresses the issues of current hypertension therapy, including a careful review of issues raised regarding diuretics and beta-adrenergic blockers, and their continuing role in the effective treatment of arterial hypertension.

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