

일반 연제(I) - 6

A CLINICAL STUDY ON ANTIHYPERTENSIVE EFFECTS OF PERINDOPRIL IN ESSENTIAL HYPERTENSION.

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To evaluate the safety and efficacy of perindopril, long acting ACE inhibitor, monotherapy in the treatment of moderate essential hypertension.

Perindopril (4mg) once a day was administered as a starting dose in 23 patients with essential hypertension in the morning and a one step upward titration was performed (perindopril 8mg once a day) was done at the end of 4weeks treatment.

After 2weeks treatment with dose of 4mg perindopril once a day, the systolic blood pressure (SBP) was decreased (131.3 ± 14.5 mmHg VS 155.7 ± 17.1 mmHg, $P < 0.001$), and the diastolic blood pressure (DBP) was also decreased significantly (107.3 ± 06.1 mmHg VS 95.7 ± 12.2 mmHg, $P < 0.001$).

After 4weeks of treatment with a mean dosage of 4.4 ± 0.8 mg, SBP and DBP was also decreased (153.0 ± 15.3 mmHg / 94.6 ± 11.6 mmHg) respectively. its effect was maintained.

After 8weeks treatment, perindopril was effective in 21 out of 23 patients.

There was no significant change in heart rate before and after perindopril treatment (78.4 ± 11.6 VS 75.5 ± 09.2 mmHg n.s).

Perindopril had no significant effects on laboratory findings such as serum creatinine, BUN, ALT/AST, WBC, platelet and lipid profiles.

Mild dry coughing was noted only 3 patients and it did not disturb continuing medication and then all patients completed for 8 weeks therapy.

It is concluded that perindopril is an effective antihypertensive agent as monotherapy once a day in mild to moderate hypertension.

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