

Average BP:
163/85 mm Hg
Average BP reduction:
-13/-2 mm Hg



Methods: Participants received either placebo or active treatment with the dihydropyridine calcium channel blocker nitrendipine 10 mg to 40 mg daily combined or replaced with enalapril 5 mg to 20 mg daily, hydrochlorothiazide 12.5 mg to 25 mg daily, or both drugs daily.

Results: After a median follow-up of 2 years, active treatment reduced SBP by an additional 10.1 mm Hg and DBP by an additional 4.5 mm Hg compared with placebo.

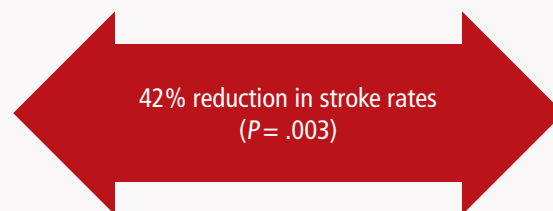
Active treatment reduced nonfatal stroke rates by 44% and all fatal and nonfatal cardiac events by 26%; however, all-cause mortality was not significantly reduced.

The results suggested treating 1000 participants for 5 years would prevent 29 strokes or 53 major cardiovascular events.

A later post hoc analysis of diabetics in the study found active treatment reduced cardiovascular mortality by 76%, all cardiac events by 63%, and overall mortality by 55%.



Average BP:
153/79 mm Hg
Average BP reduction:
-23/-7 mm Hg



References: 1. Staessen JA, Fagard R, Thijs L, et al. Randomised double-blind comparison of placebo and active treatment for older patients with isolated systolic hypertension. The Systolic Hypertension in Europe (Syst-Eur) Trial Investigators. *Lancet*. 1997;350(9080):757-764. Tuomilehto J, Rastenyte D, Birkenhäger WH, et al. <http://www.thelancet.com/journals/lancet/article/PIIS0140673697053816>. 2. Effects of calcium-channel blockade in older patients with diabetes and systolic hypertension. Systolic Hypertension in Europe Trial Investigators. *N Engl J Med*. 1999;340(9):677-684. <http://www.nejm.org/doi/full/10.1056/NEJM199903043400902>.