

CIRCADIAN BLOOD PRESSURE VARIABILITY IN ADULT AND ELDERLY HYPERTENSIVE PATIENTS

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Circadian blood pressure (BP) variations are known for decades, but the prevalence of “non-dippers” among hypertensive subjects and relationship between the “dipper” and “non-dipper” status and age, and the importance of BP variability as a potential cardiovascular risk factor, varies to a great extent in various studies. Material and method: 210 hypertensive patients aged between 30 and 85 years were included in the study. They benefited from automatic ambulatory blood pressure monitoring. An individual evaluation form was completed for each patient, which included history data regarding personal pathological cardiovascular history: coronary and cerebrovascular accidents. Results: The prevalence of “non-dippers” in the group of adult patients was 29.7%, significantly lower than that in the elderly patients (65.2%) ($p < 0.0001$). The mean age of “non-dippers” was 69.81 years, and of “dippers” was 59.16 years ($p < 0.0001$). We found a correlation between the presence of the “non-dipper” pattern of BP and the prevalence of coronary accidents, but only in adults ($p < 0.05$). There was no correlation between cerebrovascular accidents prevalence and the presence of the “non-dipper” pattern, neither in adult, nor in elderly ones ($p > 0.05$). The prevalence of cerebrovascular accidents was the same in “dippers” and in “non-dippers”, both in adults and in the elderly. Conclusions: The “non-dipper” pattern of BP is significantly higher in elderly hypertensive patients than in adult hypertensives. The “non-dipper” pattern of BP is correlated with coronary accidents in adult hypertensive patients. The “non-dipper” pattern of BP in elderly hypertensives is not correlated with the prevalence of coronary and cerebrovascular accidents.