



Discontinuing Antihypertensive Therapy in Older Adults Does Not Improve Cognition



An article published by *JAMA Internal Medicine* claims that discontinuing antihypertensive therapy for patients 75 years or older does not improve short-term cognitive, psychological or general daily functioning.

Studies have suggested that in older adults, lower, rather than higher blood pressure increases the risk of cognitive decline. The article discusses a community-based randomised study conducted by Justine E. F. Moonen, M.D., of Leiden University Medical Center, the Netherlands, and coauthors.

The study enrolled 385 participants 75 or older with mild cognitive defects and without serious cardiovascular disease and who received antihypertensive therapy. Participants were divided into two groups - those who discontinued antihypertensive therapy and those who continued it. Patients were followed up at 16 weeks. All participants were evaluated on the basis of their overall cognition compound score and changes in scores on cognitive domains, depression, apathy, functional status and quality of life.

The findings show that in the intervention group where antihypertensive therapy was discontinued, overall cognition compound scores did not differ from the group where antihypertensive therapy was continued. There was also no difference in executive function, memory, psychomotor speed, symptoms of apathy and depression, functional status and quality of life.

“Future randomised clinical trials with longer follow-up should determine whether older persons with impaired cerebral autoregulation might benefit from less stringent BP [blood pressure] targets,” the study concludes. In an accompanying editorial, Michelle C. Odden, Ph.D., of Oregon State University, Corvallis says that this study is the first step forward in building and understanding the evidence base for initiating and intensifying antihypertensive therapy as well as the effects of continuing and discontinuing therapy in older adults.

Source: [JAMA Internal Medicine](#)

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