

AMLODIPINE IN PATIENTS WITH ARTERIAL HYPERTENSION AND HYPERTENSIVE NEPHROPATHY

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It is well known that prolonged increasing of blood pressure accompanied by the affection of many internal organs, particularly kidneys. Hypertensive nephropathy is one of the major cause of renal failure, and most danger complication of pathology of kidneys. Given the high prevalence of hypertension, it remains on the study of medicinal products, the impact of which on the one hand allows providing control blood pressure and on the other - slowing down the progression to its complications, including hypertensive nephropathy.

The aim of the research was to study the influence of amlodipine on blood pressure and renal function in patients with signs of hypertensive nephropathy.

In the study included 30 patients of therapeutic department of Sumy Regional Clinical Hospital of disabled World War II. All patients were diagnosed with hypertension of different severity, in addition to the 22 patients were found signs of nephropathy such as microalbuminuria (albumin contents morning portion of urine 30 - 300 mg / l), microhematuria in 13 persons and in 6 patients - increasing nitrogen compounds of serum. Ultrasound of kidneys was performed to 25 patients - signs of nephrosclerosis were found in 12 cases. We excluded patients with diabetes mellitus, urinary stones diseases, and chronic inflammatory diseases of kidneys. Patients intended amlodipine dose of 2.5 - 10 mg for 18 - 24 days. Measure the effectiveness of amlodipine provided under the control of blood pressure within the 139/89 mm Hg, the severity of improving clinical and laboratory parameters.

Obtained data indicate that the achievement of target blood pressure numbers were observed in 24 persons (84%) during the first 7 days of treatment, and 30 people (100%) - end of second week of dosing. 22 patients (74%) ranging from 10 days of treatment were transferred to the supporting amlodipine dose - 5 mg. It was noted: in 9 patients (29%) - the disappearance of microhematuria, in 17 (60%) - reduction of albuminuria, blood creatinine level returned to normal in 2 patients (6% or 33% of individuals with elevated levels of bases). Cases of adverse reactions and intolerances to amlodipine were not observed. We recommend taking amlodipine for a long period of time (under the supervision of the district physician).

Thus, we found that with adequate choice of treatment strategy using amlodipine is effective for controlling blood pressure and to improve renal function, particularly if are noted signs of hypertensive nephropathy.