Cochrane Library Newsalert

What are the benefits and harms of aggressive blood pressure lowering in older adults with different characteristics?

FEBRUARY 19, 2025 - Results from the Systolic Blood Pressure Intervention Trial (SPRINT) have supported lower blood pressure targets among community-dwelling older adults with hypertension to reduce the risk of cardiovascular disease and early death, but intensive blood pressure lowering can also increase risks of developing acute kidney injury and experiencing dangerously low blood pressure. A recent analysis in the Journal of the American Geriatrics Society looked closely at the benefits and harms of intensive blood pressure lowering in patients with different characteristics.

The analysis found that nearly all older adults in SPRINT had a positive net benefit (meaning that predicted benefits exceeded harms) favoring a systolic blood pressure target of less than 120 mmHg compared with less than 140 mmHg.

Also, community-dwelling older adults with advanced age, frailty, or multiple prescription medications had greater net benefits favoring a lower systolic blood pressure goal despite experiencing more treatment-related harms.

"These findings demonstrate that for noninstitutionalized, ambulatory, community-dwelling older adults who meet SPRINT eligibility criteria, the evidence from SPRINT can be translated to each person using individualized risks and preferences, and that consideration of advanced age, frailty, and polypharmacy alone should not deter clinicians from recommending intensive blood pressure lowering," the authors wrote.

Full Citation: "Individualized net benefit of intensive blood pressure lowering among community-dwelling older adults in SPRINT." Mitra S. Jamshidian, Rebecca Scherzer, Michelle M. Estrella, Richard L. Kravitz, Rebecca S. Boxer, Daniel J. Tancredi, Jarett D. Berry, James A. de Lemos, Charles Ginsberg, Joachim H. Ix, Michael G. Shlipak, Simon B. Ascher. AGS; Published Online: February 18, 2025 (DOI: 10.1111/jgs.19395).

URL Upon Publication: https://onlinelibrary.wiley.com/doi/10.1111/jgs.19395

Copyright © 2021 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd., reproduced with permission.