

Ambulatory blood pressure monitoring in diabetic patients with suspected poor blood pressure control in a general practice surgery

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Objective: To determine the variation of the antihypertensive treatment in hypertensive diabetic patients who were apparently poor controlled according to their blood pressure (BP) values measured in the health care centre (HCC).

Methodology:

N = 41 patients with poor BP control (BP > 130/80 mmHg) in the previous six months (HCC6) (mean of at least three values) We performed three BP measurements (HCC3) in all of our patients before proceeding to 24 hour-ambulatory BP monitoring (ABPM)

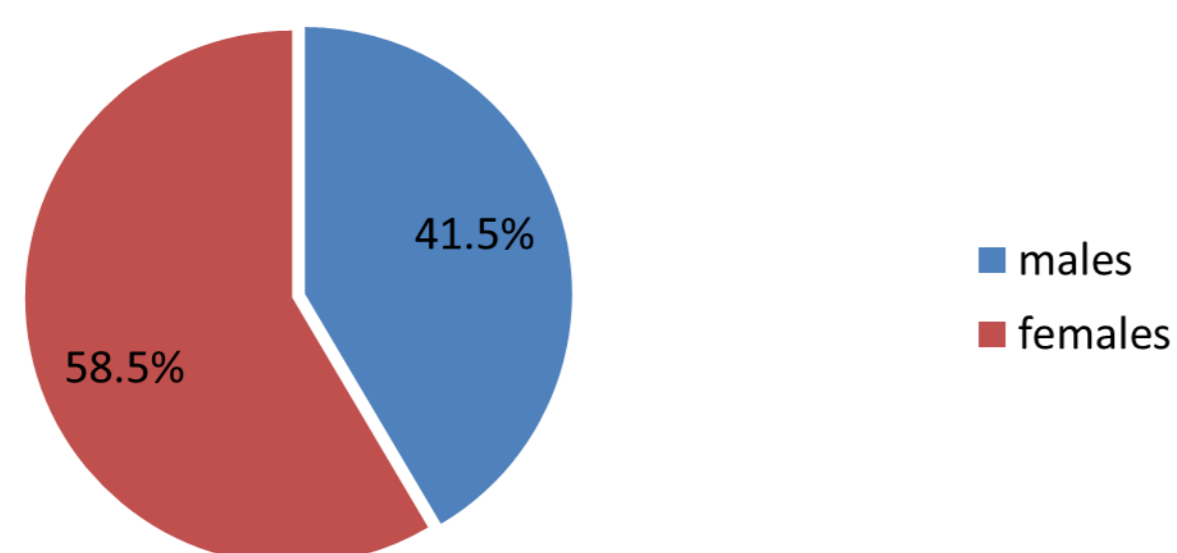
Results:

Mean age: 69.6 years (SD: 8.6)

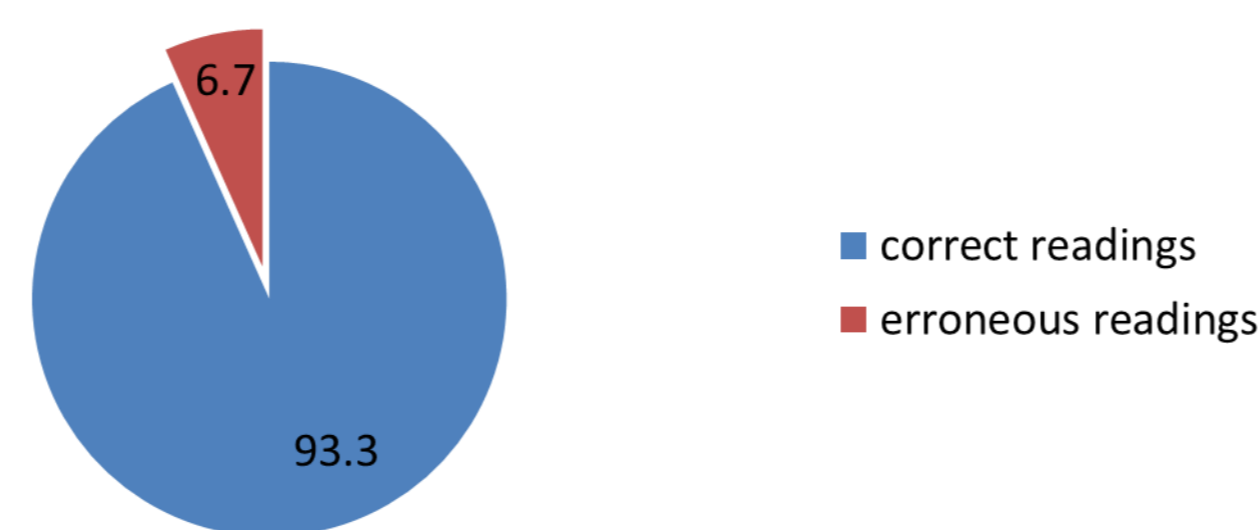
Dipper effect: 29.3%

Body mass index (BMI): 30.4 (SD 4.7)

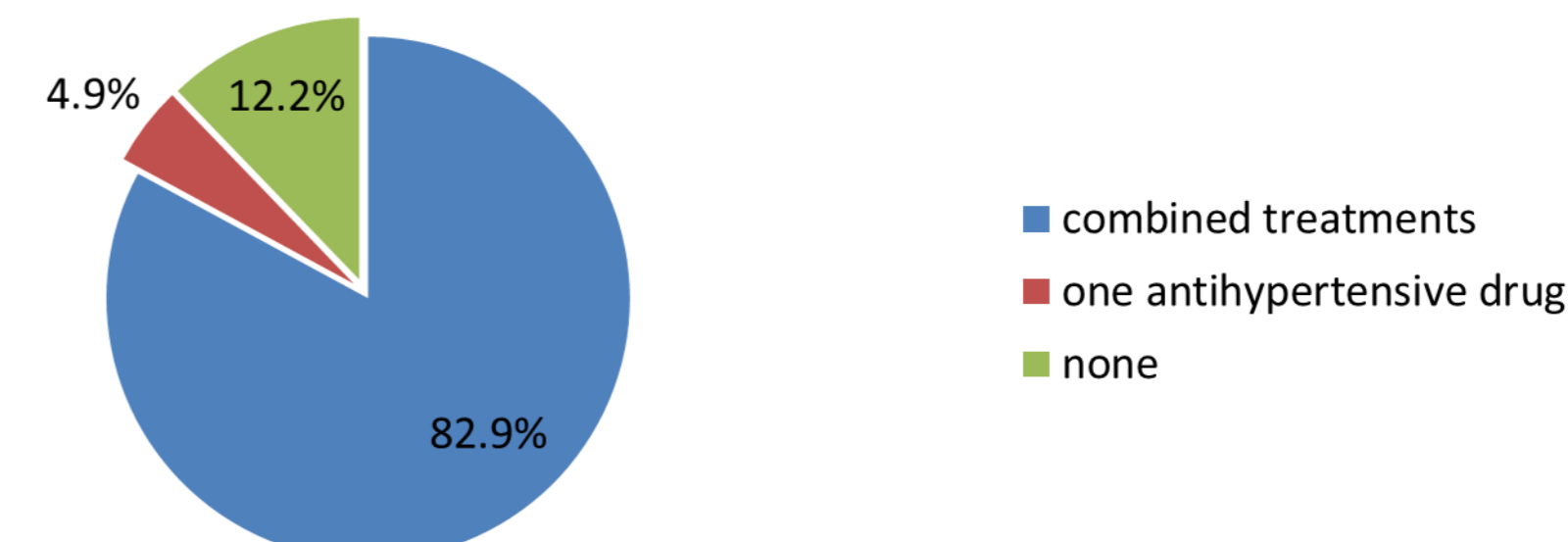
Distribution by gender



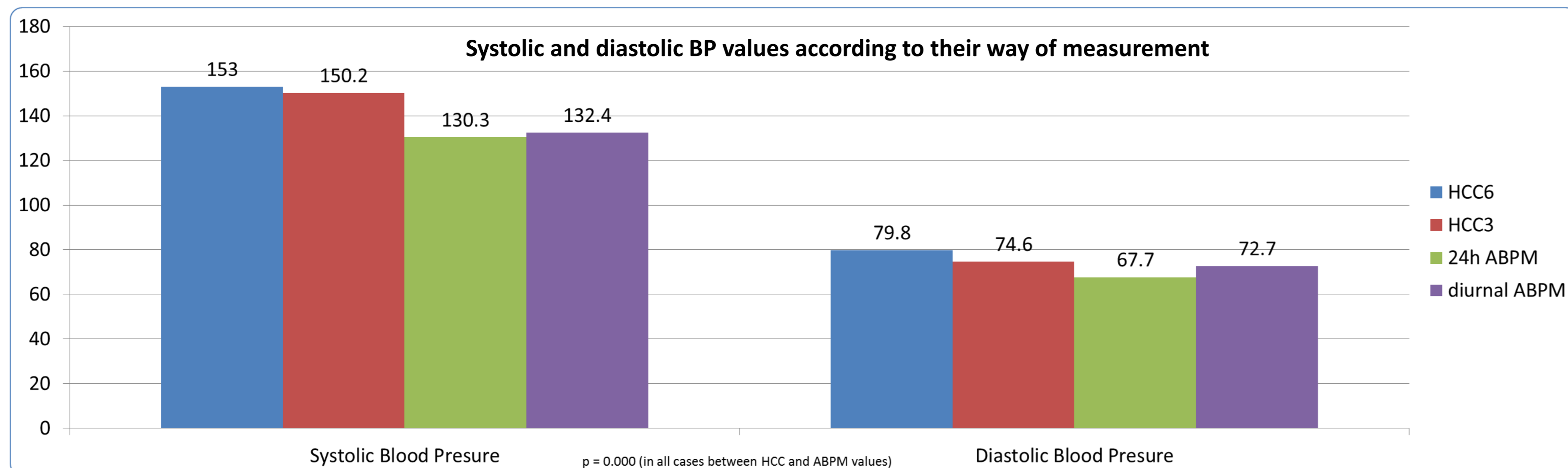
Mean correct readings (percentage)



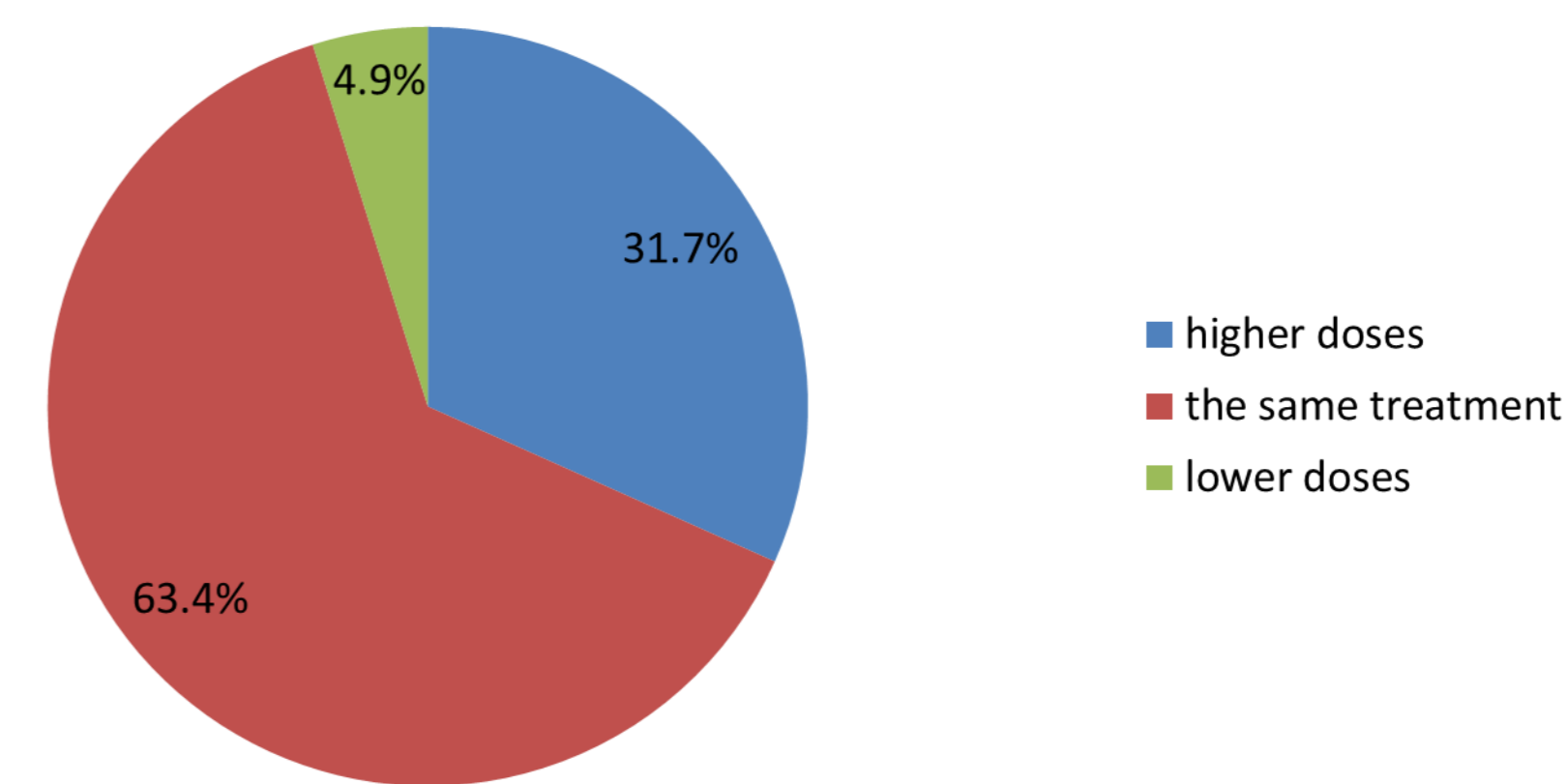
Distribution by number of antihypertensive drugs used



Systolic and diastolic BP values according to their way of measurement



Treatment management after ABPM



Conclusions:

24 hour - ABPM was useful to assess the antihypertensive treatment of the diabetic patients with suspected poor BP control. We maintained the same treatment in 63% of the patients as according to ABPM results, as they were well controlled.

