Topic: Family Practice Research

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Ambulatory Blood Pressure Monitoring and Metabolic Syndrome M. Gomez-Marcos (Primary Care Research Unit La Alamedilla) - L. Garcia-Ortiz (Primary Care Research Unit La Alamedilla) - L. Melon-Barrientos (Primary Care Research Unit La Alamedilla) - C. Herrero-Rodriguez (Primary Care Research Unit La Alamedilla) - . Parra-Sanchez (Primary Care Research Unit La Alamedilla)

Objective: To evaluate 24-h ambulatory blood pressure monitoring in hypertensive patients with and without metabolic syndrome. Method: Design, Setting and Participant: Cross sectional study. Everybody hypertensive patient with ambulatory blood pressure monitoring in two primary care centres was select . We analysed 165 patients, (51,5% women), mean age 63,9. Main outcome measurement: Age,sex, office blood pressure, systolic(SBP) and diastolic(DPB), 24-h ambulatory blood pressure monitoring(ABPM), waist circumference, HDL-Cholesterol, triglycerides and fasting glucose. Diagnostic metabolic syndrome with NECP III criteria. Results: The hypertensive patients with metabolic syndrome was a 20 %(22,5% men and 16,5% women). Waist circumference jÝ 88 cm in women or 102 in men 40;4%, triglycerides ¡Ý 150 mg/dl 19,8 %, HDL-cholesterol <40 mg/dl in men or <50mg/dl in women s 15.4%, BP ¡Ý130/85 mmHg 90,3% and fasting glucose ¡Ý 100 mg/dl 38,7%. AMBP in patients with metabolic syndrome was: Awake SBP:133,31 (IC95%:128iA138) and DBP:77,42 (IC95%:74jÂ81), Asleep SBP:122,52 (IC95%:117jÂ128) and DBP:67,91(IC95%:65jÂ71); 24h:SBP: 130,01 (IC95%:124¡Â128) and DBP:74,67 (IC95%:71¡Â78). ABPM in patients without metabolic syndrome: Awake SBP: 129,09 (IC95%:127jÂ131) and DBP: 78,29 (IC95%:77jÂ80), Asleep SBP: 115,60 (IC95%:113;Â118) and DBP: 66,21 (IC95%:65;Â68), 24-hSBP:125,4 (IC95%:123jÂ127) and DBP: 74,56 (IC95%:73jÂ76). We found differences only in SBP asleep(p<0,05). There aren; t differences in circadian pattern neither cardiovascular risk between patient with and without metabolic syndrome . Conclusions: Systolic blood pressure measure with AMBP in hypertensive patients with metabolic syndrome were higher than blood pressure in patients without metabolic syndrome. We don; t found differences in diastolic blood pressure, circadian pattern and cardiovascular risk.