

# AMBULATORY MONITORING BLOOD PRESSURE AND THEIR RELATIONSHIP WITH CARDIOVASCULAR TARGET ORGAN INJURY IN HYPERTENSIVE PATIENTS



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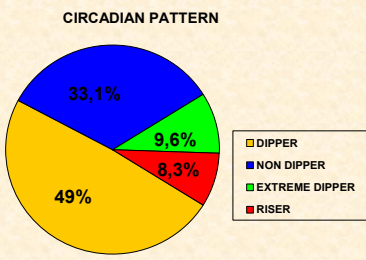


**OBJECTIVES:** To assess the relationships between blood pressure circadian pattern and cardiovascular target organ injury

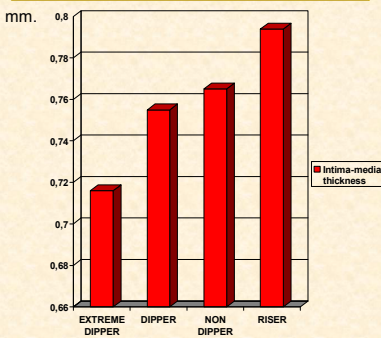
**METHODS:** Cross-sectional study. We included 508 hypertensive patients. Male 61,6%, average age 58,17 years

**MEASUREMENTS:** Age, sex, ambulatory monitoring blood pressure, Carotid intima-media thickness, left ventricular hypertrophy evaluation (PDV Cornell), and renal injury by albumin/creatinine index and glomerular filtration rate estimation.

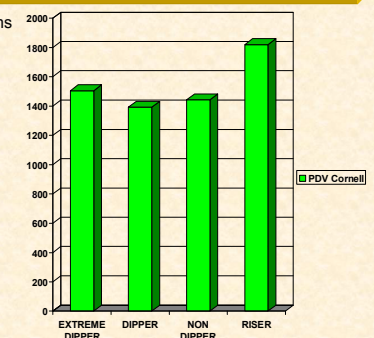
**RESULTS**  
The systolic blood pressure night fall was 10,75% (SD:7,90) and diastolic blood pressure night fall was 15,85%(SD:9,17)



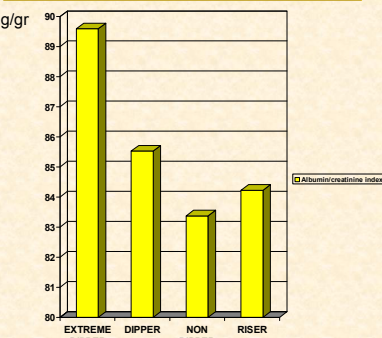
I. CIRCADIAN PATTERN AND INTIMA-MEDIA THICKNESS



II. CIRCADIAN PATTERN AND PDV CORNELL



III. CIRCADIAN PATTERN AND ALBUMIN / CREATININE INDEX



**MULTIVARIANTE ANALYSIS**

Independent variables	Average IMT		Cornell VDP		MDRD		Alb/creat. R.	
	$\beta$ (95%CI)	p	$\beta$ (95%CI)	p	$\beta$ (95%CI)	p	$\beta$ (95%CI)	p
Constant	0.279 (0.223-0.334)	0.000	852.57 (394.55-1310.59)	0.000	126.586 (111.86-141.31)	0.000	-112.84 (-233.18-7.49)	0.066
Age	0.005 (0.004-0.006)	0.000	2.92 (-4.35-10.18)	0.431	-346 (-0.48-0.21)	0.000	-33 (-1.40-0.73)	0.538
Sex (1 man / 0 women)	0.041 (0.022-0.059)	0.000	-243.07 (-406.22-79.92)	0.004	.896 (-2.28-4.07)	0.580	12.43 (-11.49-36.35)	0.308
Treatment of HT	0.022 (0.004-0.041)	0.015	69.56 (-93.76-232.88)	0.403	-1.836 (-5.03-1.36)	0.259	8.38 (-15.50-32.26)	0.490
24-hour pulse pressure	0.003 (0.002-0.004)	0.000						
Rest diastolic BP					-353 (-0.53-0.17)	0.000		
Rest HR							1.74 (0.41-3.07)	0.010
Rest pulse pressure			11.88 (4.21-19.56)	0.002				
% nocturnal fall in systolic BP							-3.28 (-4.79-1.77)	0.000
% SBP readings over reference					0.72 (0.01-0.14)	0.031		
Standard deviation of 24-hour SBP							5.16 (1.60-8.73)	0.005

## CONCLUSIONS:

There are more association of ambulatory monitoring blood pressure parameters with carotid injury evaluation, than with renal and cardiac damage.