

Impact on Hypertension Reclassification by Ambulatory Blood Pressure Monitoring (ABPM) according to the V Brazilian Guidelines on ABPM

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Dear Editor,

We would like to draw attention to the importance to publish the manuscript Impact on Hypertension Reclassification by Ambulatory Blood Pressure Monitoring (ABPM) according to the V Brazilian Guidelines on ABPM, which addresses the subject of making decisions regarding the thresholds of normality of blood pressure¹. We have found that the population studied presents similarities relating to the sample of patients receiving antihypertensive treatment, in keeping with the database of IDACO². However, notwithstanding the fact that three out of four cities in this database are

European cities, the guidelines of the European Society of Cardiology (ESC) keep as thresholds of blood pressure, to define hypertension by ABPM of 24 hours, the amounts of 125 to 130 mmHg, for systolic blood pressure, and 80 mmHg for diastolic blood pressure³. On account of that, we kindly request that the authors express their opinions about two issues: firstly, the applicability and importance of these more aggressive thresholds for hypertensive patients under treatment and, secondly, we wonder if the authors have diagnostic accuracy data for this sample regarding the conventional measurements of blood pressure and the consequent prevalence of the white-coat effect and masked hypertension.

Keywords

Hypertension; Blood Pressure Monitoring, Ambulatory / methods, Practice Guidelines as Topic.

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