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MEDICATION WITH TELMISARTAN TO CONTROL BLOOD PRESSURE

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DESCRIPTION

Normal blood pressure is thought to be a prelude to stage 1 hypertension, which is linked to metabolic problems. For a similar antihypertensive impact, the acquisition cost of telmisartan was 1.86 times greater than that of indapamide. The medication with telmisartan and indapamide for high-normal blood pressure showed to be viable and lowered the risk of metabolic syndrome. Telmisartan was more efficacious, while indapamide provided higher pharmaco-economic advantages.

According to epidemiologic studies, the risk of cardiovascular disease doubles every 20/10 mm Hg increase above a baseline blood pressure of 115/75 mm Hg. Blood pressure values of 130-139/85-89 mm Hg were classed as high normal by the European Society of Hypertension and the European Society of Cardiology in 2007. Recent research has linked high-normal blood pressure to metabolic problems such as obesity, incorrect glucose, and lipid metabolism all of which contribute to the development of metabolic syndrome (MetS) and other metabolic diseases. As a result, measures focused at preventing and treating high-normal blood pressure are critical for reducing metabolic diseases.

Currently, lifestyle changes are the primary means of preventing and treating high-normal blood pressure. Previous research has shown that lifestyle changes such as weight loss, low-salt diets, and increased physical activity can successfully regulate blood pressure and minimise cardiovascular complications. However, their performance has been uneven outside of controlled experimental conditions due to low patient compliance.

The TROPHY study discovered that in prehypertensive individuals treated with candesartan for two years, the relative risk of developing hypertension was reduced by 66.3 percent, and the progression to hypertension was delayed. Ten patients with high-normal blood pressure were treated with ramipril for three years in the PHARAO study, and their risk of hypertension was reduced by 34.4 percent. Although the efficacy of pharmacologic treatment to prevent hypertension in people with high-normal blood pressure was verified in these investigations, hypertension was the major end point in all of them. Because high-normal blood pressure is frequently associated with metabolic abnormalities that contribute to MetS, it is important to investigate if medication intervention can alleviate metabolic diseases in people with high-normal blood pressure.

Angiotensin II Receptor Blockers (ARBs) and diuretics, according to studies, are more effective in decreasing blood pressure in obese hypertension patients. Diuretics, on the other hand, have been linked to negative effects on glucose and lipid metabolism, whereas ARBs have been proven to be advantageous. Telmisartan is an ARB that can be taken orally and is used to treat essential hypertension

and prevent cardiovascular disease.

CONCLUSION

Telmisartan is also known to operate as a selective partial agonist of the peroxisome proliferator-activated receptor, an intracellular nuclear hormone receptor implicated in glucose and lipid metabolism regulation. Indapamide is a thiazide-like diuretic with a natriuretic diuretic action that reduces blood pressure. In comparison to other thiazide diuretics, it has less effect on glucose and lipid metabolism. Indapamide is currently less expensive to obtain than telmisartan. No previous study has looked at the impact of these two medicines on metabolism when used as a treatment for high-normal blood pressure. The nature of the effects in the population, particularly in people with abdominal obesity, must be determined, as well as which drug will be the most useful.