



## Big health risks tied to nightly blood pressure

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May 21, 2007, A new study has found that if the decrease is outside that range -- either less than 10 percent or more than 20 percent -- the patient faces a higher risk of heart attacks, strokes and kidney problems.

The findings illustrate the need for nighttime blood pressure monitoring, said Italian researcher Dr. Sante Pierdomenico, lead author of a study being presented at a meeting in Chicago of the American Society of Hypertension.

A 24-hour monitoring device can measure blood pressure while a patient sleeps. The patient wears the battery-operated device on the hip and a blood pressure cuff on the arm. A plastic tube connects the monitor and the cuff.

But insurance doesn't pay

The device periodically inflates the cuff and takes a blood pressure reading. Some patients wake up when the cuff inflates; others sleep through it. A University of Iowa study found that only 20 percent of patients found the device uncomfortable.

University of Chicago blood pressure specialist Dr. George Bakris recommends 24-hour blood pressure monitoring for high-risk groups, including African Americans, obese patients, diabetics and kidney patients. Results can help determine whether patients should take blood pressure pills in the morning or evening.

Twenty-four-hour monitoring costs \$250 to \$400. Medicare provides limited coverage for a few patients and no coverage for most. Many insurers also deny coverage. Some patients decline to have 24-hour monitoring because of cost, Bakris said.

Previous studies found that little or no blood pressure dip at night increases the risk of heart attacks and strokes. The new study is the first to show that a large dip also is bad, Bakris said. Low blood pressure can reduce blood flow and increase the risk of clots, he said.

Medicare will pay for 24-hour monitoring when a patient is suspected of having "white coat hypertension." This is when otherwise normal blood pressure increases when it's taken by a doctor or nurse.

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