

# Taiwan Hypertension Guideline for Diabetic Patients

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After the ACCORD trial, there are many debates regarding the traditional office BP targets for diabetes. However, the annual rates of stroke, a pre-specified secondary outcome, were decreased by 41% ( $p = 0.01$ ). Furthermore, in the standard glycemetic control group, the intensive BP treatment group had a lower 5-year CV events compared with the standard BP treatment group (6.9% vs. 9.2%,  $p < 0.05$ ). Since stroke is an important CV disease in East Asia, we recommended an SBP target of  $< 130$  mmHg for diabetic patients, using traditional BP measurement.

For the DBP target for diabetes, the HOT trial is the only RCT available. In a subgroup analysis, there was a 51% reduction in major cardiovascular events, including myocardial infarction, stroke, and CV deaths, in target group  $< 80$  mm Hg compared with the group  $< 90$  mmHg.

Diabetic patients were excluded from the SPRINT trial, so we do not have information about the optimal BP targets by AOBP measurement.

Therefore, BP targets with traditional office BP measurement are  $< 130/80$  mmHg for patients with diabetes. (COR I, LOE B)