Amlodipine/perindopril + atorvastatin on form in hypertension

A combination of amlodipine/perindopril plus atorvastatin is "cheaper" than amlodipine/perindopril alone, and is "more efficient" together with atenolol/ bendroflumethiazide than atenolol/bendroflumethiazide plus atorvastatin as a single strategy, shows a study presented at the annual meeting of the American Society of Hypertension.

The study was a US economic sub-analysis of the ASCOT* trial, and assessed costs and outcomes among 10 305 hypertensive patients with at least three cardiovascular (CV) risk factors who were randomised to receive one of the following therapies:

- atenolol/bendroflumethiazide plus placebo
- atenolol/bendroflumethiazide plus atorvastatin
- amlodipine/perindopril plus placebo
- amlodipine/perindopril plus atorvastatin.

Prospective data obtained from the ITT group during the trial were used (median 3.3 years). The analysis showed that amlodipine/perindopril plus atorvastatin was associated with the lowest number of CV events and procedures per patient, and would cost \$US17 971** per CV event avoided versus atenolol/ bendroflumethiazide plus atorvastatin, and \$US24 861 per CV event avoided versus atenolol/ bendroflumethiazide plus placebo.

The researchers note that "better health effects can be achieved with lower costs" using atenolol/ bendroflumethiazide plus placebo and amlodipine/ perindopril plus atorvastatin, than with the other two therapy options. They comment that whether amlodipine/perindopril plus atorvastatin is more cost effective than atenolol/bendroflumethiazide plus placebo "depends on the willingness to pay to avoid additional CV events".

* Anglo-Scandinavian Cardiac Outcomes Trial

** Costs were those related to study drugs and other medications, hospitalisation, and ambulatory visits.

Lindgren P, et al. Cost-effectiveness of multi-drug regimens of amlodipine + atorvastatin, compared with atenolol + atorvastatin, amlodipine + placebo, and atenolol + placebo - an anglo-Scandinavian Cardiac Outcomes Trial (ASCOT) economic sub-analysis. Journal of Clinical Hypertension (Greenwich) 9 (Suppl. A): 213, No. 5, May 2007 80107426