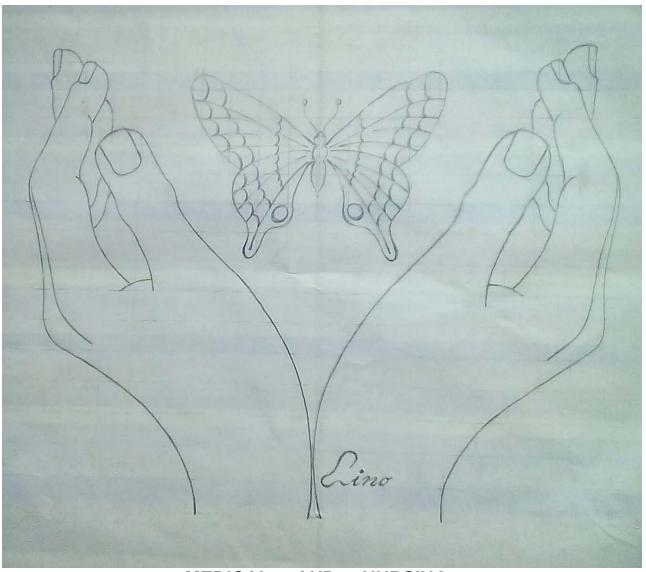
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Effects of Sars-Cov-19 treatments in patients with Hypertension: A pilot study.

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Keywords: Covid-19, EKG, Adherence to treatment, HRV.

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ABSTRACT

Background: The Covid-19 or Sars-Cov-19 virus has represented, for months, a problem of global importance as the causative agent of the pandemic. Over the months, numerous therapeutic approaches have been carried out in order to stabilize infected patients and limit the spread of the viral disease.

Aim: The aim of our pilot study is to evaluate the efficacy of Covid-19 treatment in hypertensive patients treated with Ace inhibitors given the possible role of the ACE enzyme in the mechanism of infection and spread of the disease.

Materials and Methods: At the moment, 5 subjects (1 man and 4 women) with an average age of 65 + 15 years respectively affected by COVID-19 pneumonia are enrolled. The study was started in September 2020. The preliminary data analysis was performed with the SIGMASTAT version 3.5 statistical analysis software for Windows XP. The data collection was carried out simultaneously with the request for informed consent processed by us. As regards the use of scale, it has been standardized to the international reference system for laboratory tests and instrumental tests.

Results: Preliminary data have shown that the pharmacological treatment for COVID-19 pneumonia, while determining changes in cardiovascular arrhythmic indices, does not cause a statistically significant variation in the Qt and Qtc index (QT index corrected for heart rate). The preliminary results lead us to assert that, although the sample under study is not representative for the low number of subjects currently enrolled, the values of statistical significance are such as to be able to exclude a significant interference of the pharmacological treatment for covid-19 on cardiovascular risk.

Discussion: In the initial phases of the pandemic, some works published in the international literature raised the question of a possible worsening of the prognosis in patients with covid already treated with ace-inhibitors and sartans. In light of our pilot study based, at present, on only 5 enrolled subjects, antihypertensive therapy does not seem to play a significant role in the changes in overall cardiovascular risk.

Conclusions: The covid-19 pandemic represented and still represents a problem that is not easy to solve. The advances made in optimizing treatment have made it possible to act promptly and reduce mortality. The conclusion of our pilot study is that treatment with ace-inhibitors or sartans does not determine a significant variation in arrhythmic risk assessed by calculating QT and Qtc in basal conditions (before covid-19 treatment) and in control conditions (after covid-19 treatment).

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