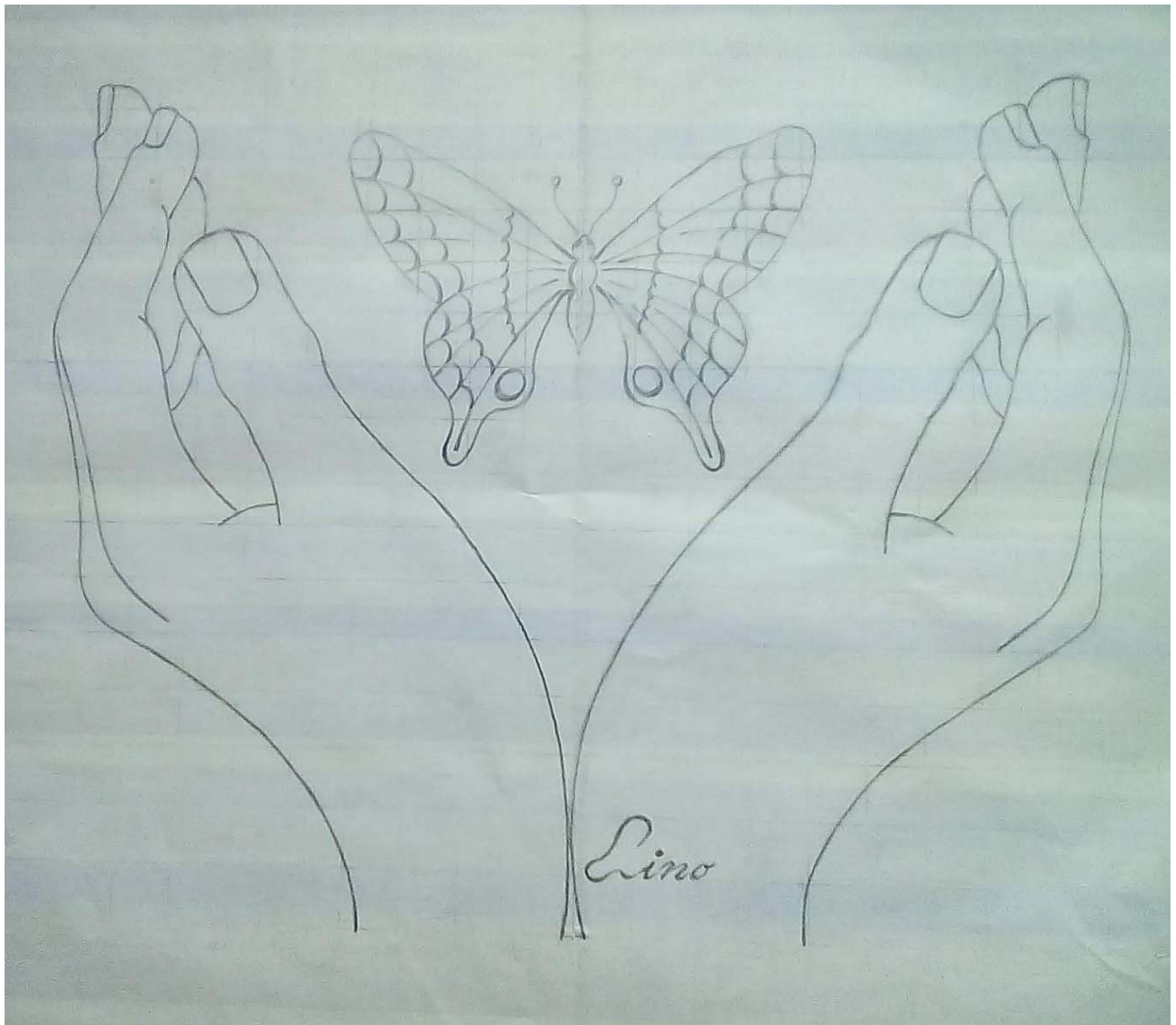


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Safety of the nutraceutical Diuripress in patients with hypertensive heart failure

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KEY-WORDS: CHD. Hypertension, nursing approach.

BACKGROUND: Hypertensive heart failure is a very frequent comorbidity in geriatric patients. This comorbidity is often associated with a state of emotional tension linked to episodes of breathlessness accompanying heart failure, particularly in conditions associated with pleural effusion. **AIM:** The aim of our pilot study carried out on 20 patients is to analyze the cardiovascular safety of Diuripres added in therapy in order to improve the circadian regularity of blood pressure through the effect of hawthorn, maintain the physiological drainage of body fluids by means of hibiscus and orthosiphon and finally normalize the electrolyte balance of magnesium. The analysis of cardiovascular safety was performed by exploring the main arrhythmic indices (Qt, Qtc and Tpeak to T end index). **MATERIALS and METHODS:** In our pilot study, 20 patients (13 men and 7 women) with a mean age of 71 + 4.9 years were enrolled. All impatient subjects enrolled in the study gave informed consent to the observational study. All patients continued treatment for heart failure based on hypertension in compliance with therapeutic compliance and professional ethics. At the time of enrollment, the patients underwent non-invasive electrocardiographic recording lasting 3 minutes in order to evaluate the effect of diuripres through the calculation of cardiovascular arrhythmic indices (QT , Qtc and Tpeak to T end Index). The main arrhythmic indices were evaluated before treatment with diuripres 1 tablet a day at 8 am and after 1 month of therapy as outpatient control at the geriatrics clinic of the San Giovanni di Dio Center Hospital in Fondi. The data were recorded with the cardiolab xai-medica digital electrocardiograph and analyzed with the SigmaStat 3.5 software for Windows XP. The paired T test was used to analyze arrhythmic index data before and after treatment. Statistical significance was set at $p < 0.050$. **RESULTS:** The results of our pilot study allow us to assert that treatment with diuripres is safe even in geriatric patients suffering from hypertensive heart failure. The absence of statistically significant variations in the main arrhythmic indices QT, Qtc and Tp/Te represents a great clinical advantage because it excludes the possibility of correlations with cardiac arrhythmias which are often frequent in elderly patients. **DISCUSSION and**

CONCLUSION: The data present in the literature report the difficulty in optimizing antihypertensive therapy and heart failure in elderly subjects. The addition of Diuripres to home therapy improves the circadian regularity of blood pressure through the effect of hawthorn, maintains the physiological drainage of body fluids through hibiscus and orthosiphon and finally normalizes the electrolyte balance of magnesium without interfering with the cardiovascular arrhythmic risk of the subject being treated. Data relating to QT, QTc and Tp/Te confirm the cardiovascular safety of the treatment. Patient follow-up is currently underway to increase the number of subjects undergoing treatment and confirm the data from the pilot study on a more representative population.

LIMITS of the study: the data are comforting but the small sample of subjects examined does not allow us to present conclusive data applicable to the entire geriatric population.

Reference:

1) Alessandro Maloberti^{1,2}, Jennifer Vanoli^{2,3}, Elia Gelfi^{2,3}, Alessandra Annaloro^{2,3}, Rita Facchetti^{2,3}, Giuseppe Mancina², Guido Grassi^{2,3}. 2022 NATIONAL CONGRESS OF THE ITALIAN SOCIETY OF HYPERTENSION (SIIA). High Blood Press Cardiovasc Prev. 2022; 29(5): 487–535.

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