

## Losartan Treatment Effect is Boosted by DASH Diet

A DGReview of : "[The DASH diet enhances the blood pressure response to losartan in hypertensive patients](#)"

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For patients with stage 1 or 2 hypertension (classification according to the Sixth Report of the Joint National Committee), the effect of losartan treatment improves significantly when administered in conjunction with the Dietary Approaches to Stop Hypertension (DASH) diet, researchers report.

While dietary changes are recognized as essential in controlling factors related to the development of hypertension, intervention has primarily focused on decreasing salt intake. Results from previous studies suggest that low fat/high fibre diets are effective in reducing hypertension with or without sodium restriction.

Dr. Paul R. Conlin of Brigham and Women's Hospital in Boston, Massachusetts, United States, and colleagues, compared the results of losartan treatment in patients following the DASH diet or eating foods representative of the typical American diet (control group). Both diets provided 2100 kcal energy and 3 g sodium per day.

A total of 55 hypertensive patients participated in the double blind, randomised, cross-over study.

After a 2-week observation of caloric intake and compliance (baseline period),

participants were randomly assigned to the DASH (27 patients) or control (28 patients) diet for 8 weeks.

The 8-week dietary regimen was divided into two 4 week treatment regimens, in which patients received losartan (50 mg) or a placebo daily.

Blood pressure was measured with ambulatory monitors at the end of the baseline period and both 4-week treatment periods.

For patients receiving losartan, systolic and diastolic blood pressure was significantly reduced from baseline on the control diet (-6.7 + 1.5/-3.7 + 1.0 mm Hg,  $P < .05$ ), with an even greater effect evident for the DASH diet (-1.7 + 1.5/-6.9 + 1.0 mm Hg,  $P < .05$ ).

A reduction in systolic blood pressure in patients receiving placebo occurred on the DASH diet (-5.3 + 1.5 mm Hg,  $P < .05$ ). No other significant changes to blood pressure levels were observed.

Researchers noted differences in overall response to diet and losartan treatment between ethnic groups. Non-African Americans showed a greater response to losartan treatment, in which there was no significant difference between the DASH and control diets. Alternatively, African Americans showed a marked sensitivity to losartan treatment when combined with the DASH diet.

"For hypertensive individuals, adopting the DASH diet may further lower blood pressure and lead to better control rates," the researchers conclude.

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