家庭血圧測定と24時間自由行動下血圧測定を用いて定義した
夜間高血圧の心血管イベント予測能の比較

Direct comparison of the risk of cardiovascular events on nocturnal hypertension defined by home and ambulatory blood pressure: The J-HOP study

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【Introduction】The aim of this study was to directly compare the prognostic power of nocturnal hypertension defined by home blood pressure (BP) monitoring (HBPM) versus ambulatory BP monitoring (ABPM) for future cardiovascular events.

【Methods】We analyzed nocturnal BP data of 1005 participants who were taken both ABPM and HBPM in the J-HOP study group (mean 63±11 years, 50% men). Nocturnal hypertension was defined as nocturnal home or ambulatory systolic BP (SBP) ≥120 mmHg.

【Results】Nocturnal home SBP was higher compared to nocturnal ambulatory SBP (123 ± 15 vs. 120 ± 14, p<0.001). The percentage of nocturnal hypertension defined by HBPM and ABPM were 19.6% and 10.2%, respectively (p<0.001). Over a median 7.6 ± 3.4 years follow-up, 80 cardiovascular disease (CVD) events occurred. Cox model showed that nocturnal hypertension defined by HBPM was independently associated with future CVD events (hazard ratio [HR] 1.78, 95% confidence interval [CI] 1.00–3.15), but was not observed by ABPM (HR 1.24, 95% CI 0.75–2.06).

【Conclusion】This is the first comparison prospective study that nocturnal hypertension defined by HBPM could be a superior predictor of future CVD events than those by ABPM.