

# Highlights

## :: High Blood Pressure Raises Stroke Risk in Elderly

If you or a loved one is over 80 years old, you should pay special heed to your blood pressure readings, a new study finds.

About three-quarters of people over the age of 80 have high blood pressure, known medically as hypertension, and — especially in women — it is likely to be poorly controlled, leaving them at serious risk for a stroke.

The very elderly are among the fastest growing segments of the U.S. population and they are at highest risk for high blood pressure, which increases as a person ages. Even for individuals free of high blood pressure at age 65, the remaining lifetime risk of developing the condition is approximately 90 percent.

Donald Lloyd-Jones, M.D., assistant professor of Preventative Medicine at Northwestern University Feinberg School of Medicine in Chicago, Ill., led the study, which found that fewer than 10 percent had blood pressure in the “normal” range (less than 120 systolic over 80 diastolic, or 120/80). Those categorized as having high blood pressure had blood pressure of greater than 140/90.

The study examined data from almost 5,300 (2,300 men and approximately 3,000 women) participants of the long-running Framingham Study. The study found that only 38 percent of men and 23 percent of women had their blood pressure controlled to recommended levels of less than 140/90.

Most research on high blood pressure has been limited to people younger than 75, and there is little information regarding current patterns of treatment and control of high blood pressure among those 80 and older.

“We must make identification, treatment, and, when possible, the control of hypertension in this group a national priority,” says Dr.

Lloyd. (*Journal of the American Medical Association*, July 27, 2005 [www.ama-assn.org](http://www.ama-assn.org))



## :: Nasal Spray Offers Migraine Relief for Teens

A prescription nasal spray commonly used by adults for migraine headache relief appears to be effective and safe for young people ages 12 to 17, a new study finds.

The multicenter study, led by Paul Winner, D.O., director of the Palm Beach Headache Center in Florida, compared the results in 248 adolescents who were treated with a placebo (a saline solution) or with zolmitriptan (Zomig) 5 mg nasal spray. The youngsters were initially given the saline solution. The remaining 171 who still had moderate to severe pain were treated again either with the saline solution or with zolmitriptan nasal spray. By study design, neither the physicians nor the participants knew when the placebo nasal spray or when zolmitriptan was used. The study found that:

- One hour after taking zolmitriptan nasal spray, 28 percent were pain-free and 51 percent could resume normal activities.
- One hour after using the placebo nasal spray, 10 percent were pain-free and 38 percent resumed normal activities.
- Two hours after treatment, 39 percent who used zolmitriptan nasal spray were pain-free, compared to 19 percent who used the placebo spray.

None of the participants experienced serious adverse side effects. A small number did experience adverse side effects, such as a bad or metallic taste in the mouth.

Eight to 12 million American children and adolescents — more than 1 in 10 — get migraine headaches, according to the American Headache Society. The Food and Drug Administration has approved prescription drugs to treat migraines in adults, but not for adolescents.

“This is the first study to help us evaluate the effectiveness of using this medication in children, who have no prescription alternatives when over-the-counter drugs don’t work for them,” says Dr. Winner.



The research was supported by a grant from AstraZeneca, which makes zolmitriptan. (American Headache Society 47th Annual Meeting, 2005).

### **:: Type of Epilepsy Drug May Affect Sexual Function in Men**

Men with epilepsy frequently experience sexual problems, including reduced sexual desire and impotence. These problems appear to be linked to antiepileptic medications, so researchers are trying to determine which drugs have less of an adverse impact.

A new study, led by Andrew G. Herzog, M.D., director of the Harvard Neuroendocrine Unit at Beth Israel Deaconess Medical Center in Boston, Mass., looked at three antiepileptic medications, and found that one is less likely to affect testosterone, the hormone in men that is crucial to sexual function.

The research involved 85 men with epilepsy: 25 were taking carbamazepine (Tegretol); 25 were on phenytoin (Dilantin); 25 were on lamotrigine (Lamictal); and 10 had not taken antiepileptic medication for the past six months. Sexual function questionnaire scores and serum hormone levels were compared among the four groups of men with epilepsy and 25 normal controls (men who did not have epilepsy).

The study found that lamotrigine is less likely to inhibit the amount of testosterone in the body than are carbamazepine and phenytoin. This is because carbamazepine and phenytoin produce enzymes that prevent some of the testosterone from being used.

“This investigation shows substantial and statistically significant differences in the effects of various antiepileptic drugs on sexual interest and function as well as biologically available testosterone levels,” Dr. Herzog says.

He notes, however, that although lamotrigine fares better than the older enzyme-inducing antiepileptic drugs, comparisons with some of the

newer drugs, such as levetiracetam (Keppra) and zonisamide (Zonegran) need to be done.



**American Academy of Neurology Foundation  
The Brain Matters**  
[www.thebrainmatters.org](http://www.thebrainmatters.org)

**National Institute of Neurological  
Disorders and Stroke**  
(800) 352-9424  
TTY: (301) 468-5981  
[www.ninds.nih.gov](http://www.ninds.nih.gov)

**Epilepsy**  
**American Epilepsy Society**  
(860) 586-7505  
[www.aesnet.org](http://www.aesnet.org)

**Epilepsy Foundation**  
(800) 332-1000  
[www.epilepsyfoundation.org](http://www.epilepsyfoundation.org)

**Headache**  
**American Council for Headache Education**  
(800) 255-ACHE (255-2243)  
[www.achenet.org](http://www.achenet.org)

**National Headache Foundation**  
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[www.headaches.org](http://www.headaches.org)

**High Blood Pressure**  
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(301) 592 8573  
TTY: 240 629 3255  
[www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)

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**American Stroke Association**  
(888) 4-STROKE, (888) 478-7653  
[www.strokeassociation.org](http://www.strokeassociation.org)

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