

# HyperTensia 2025



# **Newer Drug Therapies for Hypertension**

Recent advancements in hypertension treatment have led to the development of novel drug classes and combination therapies to improve blood pressure control and reduce cardiovascular risks.

## 1. Angiotensin Receptor-Neprilysin Inhibitors (ARNIs)

**Example: Sacubitril/Valsartan (Entresto)** 

#### Mechanism:

- Combines Valsartan (ARB) with Sacubitril, which inhibits neprilysin (an enzyme that breaks down vasodilators).
- Increases levels of natriuretic peptides, promoting vasodilation and sodium excretion.

#### Use:

 Approved for heart failure, but shows promise in hypertension, especially in high-risk patients.

## Advantages:

- More effective in reducing BP than ARBs alone.
- Beneficial for heart and kidney protection.

# 2. Dual Endothelin Receptor Antagonists

**Example: Aprocitentan** 

#### · Mechanism:

 Blocks endothelin receptors (ET-A & ET-B), preventing blood vessel constriction.

#### • Use:

 Resistant hypertension (when BP remains high despite using 3+ drugs).

## Advantages:

 Effective for patients who do not respond to conventional therapies.

# 3. Aldosterone Synthase Inhibitors

**Example: Baxdrostat** (Investigational)

Mechanism:



# HyperTensia 2025



 Inhibits aldosterone synthesis, reducing sodium retention and blood pressure.

#### • Use:

Resistant hypertension and patients with primary aldosteronism.

## Advantages:

 Selective action, reducing side effects seen with older aldosterone blockers (e.g., Spironolactone).

## 4. Nonsteroidal Mineralocorticoid Receptor Antagonists (MRAs)

**Example: Finerenone** 

#### Mechanism:

 Blocks mineralocorticoid receptors, reducing salt and water retention while preventing fibrosis.

#### • Use:

 Approved for chronic kidney disease (CKD) with hypertension and diabetes.

### Advantages:

 Less risk of high potassium compared to older MRAs like Spironolactone.

# 5. Centrally Acting Amino Acid-Based Drugs

**Example: Moxonidine** 

#### Mechanism:

 Stimulates imidazoline receptors in the brain, reducing sympathetic nervous activity and lowering BP.

#### • Use:

 Hypertension with metabolic syndrome (helps improve insulin sensitivity).

## Advantages:

Fewer side effects than older central-acting drugs like Clonidine.

# 6. Novel Vasodilators (Soluble Guanylate Cyclase Stimulators)

**Example: Vericiguat** 

Mechanism:



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 Stimulates soluble guanylate cyclase (sGC), enhancing nitric oxide effects and dilating blood vessels.

#### Use:

o Approved for **heart failure**, but under study for hypertension.

## Advantages:

 Works differently from traditional vasodilators, offering a new treatment option for resistant cases.

## 7. New Drug Combinations for Better Control

- Quadpill (Low-Dose Four-Drug Combination)
  - Contains low doses of four antihypertensive drugs (ACE inhibitor, ARB, diuretic, CCB).
  - Advantages: Better BP control with fewer side effects than highdose single drugs.

## **Future Directions in Hypertension Therapy**

- **Gene Therapy:** Research into targeting genes involved in BP regulation.
- RNA-based Drugs: Potential to block hypertension-related proteins.
- Personalized Medicine: Al-driven BP monitoring to tailor treatment.