

APPENDIX

1E

FOR IMMEDIATE RELEASE

March 23, 2000

Contact: Beth Cassady or Melanie Caudron

301-897-2628

media@acc.org

ACC Clarifies Clinical Alert on Alpha Blockers for Hypertension Treatment

(BETHESDA, MD)-The American College of Cardiology (ACC) is clarifying its previously released information on alpha-adrenergic blockers for the treatment of hypertension to emphasize the intent of its March 15, 2000, statement. The ACC Clinical Alert on Alpha Blockers for Hypertension stated that physicians should carefully reassess the use of alpha blocker doxazosin (Cardura®), rather than automatically discontinuing its use, based on the findings of a study sponsored by the National Heart, Lung, and Blood Institute (NHLBI). The ACC strongly encourages physicians to review the NHLBI data and statement for clarity and guidance in treating hypertensive patients.

The ACC clinical alert followed announcement of the results of a large study on the treatment of hypertension on March 15 at the ACC 49th Annual Scientific Session in Anaheim, Calif.

In its official statement, which follows, the ACC Hypertensive Diseases Committee urged patients taking an alpha blocker to see their physicians for reassessment. "This is important because the treatment of hypertension and the choice of medication should be individualized for each patient," stated Committee Chair Dr. Robert J. Cody.

The ACC clinical alert can also be found at www.acc.org.

ACC Clinical Alert on Alpha Blockers for Hypertension (released March 15, 2000)

The American College of Cardiology (ACC) recommends that physicians reassess use of a widely prescribed drug, an alpha-adrenergic blocker, for the treatment of hypertension. This recommendation follows announcement of the results of a large high blood pressure study on March 15, 2000, at the ACC 49th Annual Scientific Session in Anaheim, Calif. Approximately 50-million Americans have hypertension, or high blood pressure.

The study was halted last week by the study sponsor, the National Heart, Lung, and Blood Institute (NHLBI), due to data showing that the alpha blocker, doxazosin (Cardura®), is less effective than the more traditional diuretic in reducing some forms of cardiovascular disease, such as congestive heart failure. The study, Antihypertensive and Lipid Lowering Treatment to Prevent Heart Attack Trial (ALLHAT), showed that users of doxazosin had 25 percent more cardiovascular events and were twice as likely to be hospitalized for heart failure than users of the diuretic chlorthalidone.

According to the NHLBI, of the 24 million Americans who take medication to treat their hypertension, about one million use an alpha blocker. "The ACC encourages physicians who treat hypertensive patients to review the new data with their colleagues to ensure the

rapid dissemination of this important information," said Dr. Robert J. Cody, chair of the ACC Hypertensive Diseases Committee and associate chief of the Cardiovascular Division at the University of Michigan Medical School in Ann Arbor. "At the same time, hypertensive patients taking an alpha blocker should first see their physicians before discontinuing its use. This is important because the treatment of hypertension and the choice of medication should be individualized for each patient."

The results were presented at the ACC meeting by Dr. Curt Furberg, of the Wake Forest University School of Medicine in Winston-Salem, N.C., and Dr. Barry Davis, of the University of Texas School of Public Health in Houston. For more information about the ALLHAT study, go to www.nhlbi.nih.gov and go to "news" and "press releases."

The American College of Cardiology, a 25,000-member nonprofit professional medical society and teaching institution, is dedicated to fostering optimal cardiovascular care and disease prevention through professional education, promotion of research, leadership in the development of standards and guidelines, and the formulation of health care policy.