

Book Review

**The Treatment of Hypertension
A Story of Myths, Misconceptions,
Controversies and Heroics
2nd Edition. By Marvin Moser, MD**

93 pages. Darien, CT: Le Jacq Communications, Inc.; 2002
\$17.00 ISBN 192966009X

The Treatment of Hypertension—A Story of Myths, Misconceptions, Controversies and Heroics by Dr. Marvin Moser is a true jewel. It is short yet comprehensive; easy-to-read, even chatty, yet solidly scientific; opinionated (in the best sense of the word), yet the author's biases are fully supported. This book provides the neophyte to hypertension, and the gray beard alike, with a look into the history and development of one of the great success stories in modern medicine—the appreciation of the risk of having an elevated blood pressure, the development of effective and well-tolerated treatments for hypertension, and finally the still on-going tale of proving that treatment reduces morbidity and mortality. The references and anecdotes alone are worth the hour or two it takes to read the book.

Few, if any, hypertension specialists are as well qualified as Dr. Moser to author a book such as this.

- He was among the first to study how to treat hypertension and he did so at a time when few effective medications were available.
- He was the Chair of the First Joint National Committee on the Detection, Evaluation, and Treatment of High Blood Pressure (JNC I) and the only person to be a member of the leadership of all six Joint National Committees.
- At times, he was the lone voice in the wilderness in his passionate defense of diuretics as safe and effective treatment for hypertension. So many other experts had become enamored with unsupported pathophysiology-based rationales for abandoning these drugs and substituting others whose superiority was not based on solid evidence. His position about the value of this class of drugs is now universally held.
- He continues to be a major voice in the United States and abroad, disseminating the critical public health message that hypertension is not adequately treated in spite of all of the effective drugs and solid evidence we have on the benefits of treatment.

The Treatment of Hypertension details the history of our understanding of hypertension and its treatment. The book delineates how this condition evolved from a characteristic felt to be a result only of kidney disease to one considered to be the circulatory compensation necessary to perfuse vital organs, and finally to a major factor in increasing the risk for stroke, heart attack, kidney disease, and premature mortality in the 50–60 million Americans and more than one billion people worldwide affected with high blood pressure. Dr. Moser skillfully leads the reader through the voluminous literature that originally challenged the notion that hypertension should be treated at all, to the present time when the argument has shifted to when—and in whom we should begin therapy, and how aggressive we should be in our treatment goals.

Dr. Moser details the evolution of hypertension treatment guidelines to help enlighten the practitioner in the year 2002, with an understanding

of where we came from. He deals with most, if not all, of the major therapeutic issues facing those of us who provide advice to practitioners, patients, governments, and others who pay for health care—and he does so with his characteristic wisdom:

- Is there a “J” curve?
- Is it systolic rather than diastolic blood pressure that predicts risk? (He doesn't talk about pulse pressure.)
- Should we depend on life style modification and if so, what is its role in current therapy?
- Should we treat older hypertensives?
- Which drug is “best”?
- Are diuretics safe?
- Are calcium antagonists?
- Are drugs that interfere with the renin-angiotensin-aldosterone system really better than other approaches to treatment?
- Is it necessary to do renin profiling to select the best treatment option for an individual patient? (He doesn't spend any time,

nor should he in this book, on the evaluation for secondary hypertension.)

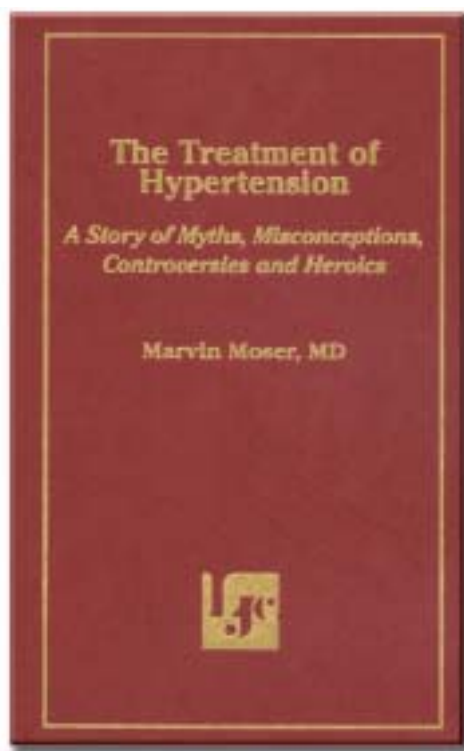
• What have new trials added to our knowledge? (There is only a brief mention of future trials and how they will influence our decisions.)

All this and more in 82-plus pages!

I do have some quibbles:

- There is too much emphasis on the role of promotional activities in explaining the use of newer agents. Many objective scientists and clinicians were justified in their support of new concepts and molecules until data from clinical trials failed to confirm the expected benefits of certain approaches based on animal studies and small trials. They were not simply interested because of marketing.
- His list of position papers produced by the National High Blood Pressure Education Program is not complete.
- Even though the fact that there is a need for combination therapy in order to reach blood pressure goals in the large majority of hypertensive patients, Dr. Moser still credits the drug that was the initial treatment choice in a clinical trial for the benefits noted in the study. In virtually all long-term trials, multiple agents are needed.
- He spends no time on treatment of common comorbid conditions such as hyperlipidemia and/or diabetes. For another time and another book, perhaps.
- Diuretics and β blockers were not superior to other agents in improving quality of life (as noted on page 52). They were just not inferior, as had been expected.

The understanding of the role of hypertension and the development of treatments for it is one of the great success stories of modern medicine. A mere 60 years ago experts ridiculed those who believed that elevated blood pressures needed to be reduced. For those who have lost sight (or never knew) of the fact that since the second half of the 20th century we have gone from ignoring, or even actively not treating patients with all but the highest blood pressures, to where we are now, this volume is a must! Even for those of us who are familiar with this saga, this book is very useful. I look forward to the day when the history of the treatment of malignancies and degenerative diseases can be so elegantly condensed and explained.



Henry Black, MD, Rush Presbyterian/St. Lukes Medical Center, Chicago, IL