

Excessive Blood Pressure Lowering: Possible Cause of Alzheimer's Disease

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I am a retired physician, urologist, with familiar experience with Alzheimer's. During my active medical practice I have never been just a blind follower of the official science and I always tried to choose the appropriate treatment mode for every single patient, considering his age, comorbidities, psychosocial state etc. I have also been thinking a lot about Alzheimer's disease and its possible causes and I came to a very intriguing cognition that one of the main causes of its increasing incidence could be a generally excessive use of antihypertensive drugs.

Few years ago in the Institute of Physics of the Medical highschool of Rijeka has been exposed a very interesting experiment. It was a presentation of pulsed flow through two tubes of equal diameter, one of them was a latex and the other one a glass tube. The result was impressing: at the end of the latex tube, which had a good compliance, there was an almost continuous stream of water, and at the end of the glass tube the water was only dripping. This can be compared with the state of the arteries in young and elderly people.

A few decades ago, at the time when my generation has been studying medicine, as normal systolic pressure <100 mmHg plus age (e.g. for a 60-year old person 160 mm Hg) has been considered, and this was a result of 100 years of medical experiences. Nowadays a normal systolic pressure should be <120-25 mm Hg. Over the past few years all over the world there have been published several papers on to extensive lowering of blood pressure in elderly, performed most

probably under influence of the pharmaceutical industry lobbies. The arteries in most elderly people are more or less rigid and their organism is trying to increase the blood pressure to improve the transport of oxygen to the brain. This blood pressure increase might be not the cause of myocardial and cerebral infarction, but only a sign of the deterioration of the arteries. Finally, the extremely high blood pressure in stroke patients at the time of the hospital admission is most probably the result of the desperate attempt of the body to supply the brain with oxygen and not the proper cause of the stroke.

The logical consequence of such an extensive, long lasting lowering of the blood pressure must be the continuous hypoxia of the brain. The published data about much higher Alzheimer's incidence in developed countries, with the highest prevalence in people aged 65+ years confirm this hypothesis.

On the other side, it is known that women are generally more conscientious regarding medications, including antihypertensive medication, and that is probably why they are more likely to suffer from Alzheimer's disease.

A simple retrograde study regarding Alzheimer's patients, based on the further antihypertensive therapy and mean blood pressure values data could represent a base for new insights in etiology and prevention of this serious disease.

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