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Restoration of circadian blood pressure profile and clinical status under immunocorrective therapy in patients with ischemic heart disease and arterial hypertension

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Keywords. Ischemic heart disease, arterial hypertension, circadian rhythm, non-dipper, immunocorrective therapy, hemodynamics

Relevance. Disturbances of circadian blood pressure rhythm, particularly the non-dipper pattern, are recognized as independent predictors of adverse cardiovascular outcomes in patients with ischemic heart disease and arterial hypertension. However, standard therapy has limited impact on restoring physiological circadian regulation, which necessitates the search for additional therapeutic approaches.

Aim of the study. To assess the effect of immunocorrective therapy on circadian blood pressure profile and clinical status in patients with ischemic heart disease associated with arterial hypertension.

Materials and methods. The study included 120 patients divided into three groups depending on the therapeutic approach. Group I received thymus-dependent immunocorrective therapy, Group II received an alternative immunomodulatory regimen, and Group III received standard therapy. Serum levels of hs-CRP, interleukin-6, and interferon-γ were assessed before and after treatment. Statistical analysis was performed with significance set at $p<0.05$.

Results: Immunocorrective therapy was associated with significant improvement of circadian blood pressure regulation. The proportion of patients with a non-dipper profile markedly decreased in Groups I and II, whereas only minimal changes were observed in the control group. Systolic and diastolic blood pressure levels decreased more significantly in the treatment groups, accompanied by normalization of heart rate. Clinical assessment demonstrated a positive shift in angina severity, with redistribution of patients toward lower functional classes, particularly in the group receiving thymus-dependent immunocorrection.

Conclusion. Immunocorrective therapy promotes restoration of physiological circadian blood pressure patterns and improves hemodynamic regulation in patients with ischemic heart disease and arterial hypertension.

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