

Information Sheet #02

Medicines for high blood pressure:

Angiotensin receptor blockers (ARBs)



Blood Pressure Association

the blood pressure charity

Angiotensin receptor blockers (ARBs for short) are medicines that are often used to treat high blood pressure. These medicines have names that end in "sartan"

May 2009

How do they work?

ARBs block the effects of a hormone called angiotensin II in your body.

When angiotensin II enters your blood stream your blood vessels become narrower. This gives your blood less space to move in, which raises your blood pressure. Angiotensin II also triggers a hormone that makes your body retain water. Having more fluid in your body, in a restricted space, will cause your blood pressure to rise.

ARBs lower your blood pressure by blocking the actions of angiotensin II. This allows your blood vessels to relax and widen, making it easier for blood to flow through. It also reduces the amount of water your body retains, which lowers your blood pressure.

Who might be given ARBs?

Most people who have high blood pressure will need to take one or more medicines to control it. ARBs are a popular first-choice medicine for high blood pressure.

ARBs work in roughly the same way as another type of blood pressure medicine called an ACE inhibitor. Some people are not able to take an ACE inhibitor because of side-effects. If this is the case for you, then your doctor may decide to try an ARB.

Related information sheets

- ACE inhibitors
- Diuretics
- Calcium-channel blockers (CCBs)

It should work as well as an ACE inhibitor without causing you side-effects.

ARBs are particularly recommended for people who are under 55 or who are not of African Caribbean origin. However, even if neither of these apply to you may be given an ARB as a first choice. If you need to take more than one medicine to control your blood pressure enough, you may be given an ARB as a second or third medicine.

ARBs can be useful for people who have diabetes or kidney disease as well as high blood pressure. This is because there is some evidence to show that they can protect your kidneys.

Who would not be given ARBs?

If you are pregnant, breastfeeding or planning a pregnancy, you should not be given an ARB.

Rarely, ARBs can interfere with other health problems you may have, or with medicines you are taking. Your doctor should always consider your overall

For more information, please contact:

The Blood Pressure Association

Address: 60 Cranmer Terrace, London SW17 0QS

Info Line: 0845 241 0989 (11am - 3pm Mon to Fri)

Website: www.bpassoc.org.uk

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Angiotensin receptor blockers used in the UK

Medicine name	Brand names
Candesartan	Amias
Eprosartan	Teveten
Irbesartan	Aprovel, CoAprovel
Losartan	Cozaar, Cozaar Comp
Olmesartan	Olmetec, Olmetec Plus
Telmisartan	Micardis, Micardis Plus
Valsartan	Diovan, Co-Diovan, Exforge

health and treatment, not just blood pressure treatment, before giving you any new medicine.

Do they have side-effects?

Most people will have no side-effects from their blood pressure medicines. They usually only happen when you start to take a new medicine, or a higher dose of your medicine. If you do experience a side-effect it may lessen over time as your body gets used to the medicine. If not, your doctor may change your dosage or your medicine if they feel it is appropriate.

The side-effects of ARBs are usually quite mild; the most common being dizziness, headache, or cold or flu-like symptoms.

Very rarely you could have an acute allergy to an ARB, with swelling around your mouth or throat. If your breathing is affected, contact your doctor immediately.

Other things to be aware of

ARBs seem to work more better at lowering your blood pressure if you also reduce the amount of salt you eat.

Check with your doctor or pharmacist before taking any other medicines in combination with your ARB – this includes over-the-counter treatments.

As with other blood pressure lowering medicines, once you start taking an ARB, be prepared to stay on it for the long term. Some people stop taking their blood pressure medicines when they think their blood pressure is under control, but doing this can put your health at risk. If you have any concerns about your medicines, speak to your doctor or pharmacist.

About this information sheet

This information sheet was produced by the Information & Support team at the Blood Pressure Association. It is intended for people who have high blood pressure, or who are interested in high blood pressure. For more about how we make our information, go to www.bpassoc.org.uk/AboutUs

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