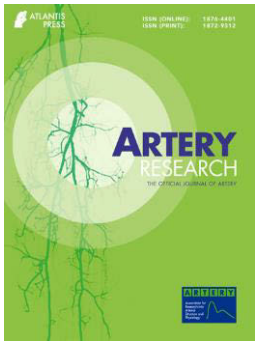

Artery Research

ISSN (Online): 1876-4401 **ISSN (Print): 1872-9312**
Journal Home Page: https://www.atlantis-press.com/journals/artres

Artery 2014 symposium

Harry Struijker-Boudier

To cite this article: Harry Struijker-Boudier (2016) Artery 2014 symposium, Artery Research 15:C, 19–20, DOI: https://doi.org/10.1016/j.artres.2016.06.003

To link to this article: https://doi.org/10.1016/j.artres.2016.06.003

Published online: 3 December 2019

Artery Research (2016) 15, 19–20

Available online at www.sciencedirect.com

ScienceDirect

journal homepage: www.elsevier.com/locate/artres

REVIEW

Artery 2014 symposium Introduction

Harry Struijker-Boudier*

Department of Pharmacology and Toxicology, Maastricht University, P.O. Box 616, 6200 MD Maastricht, The Netherlands

Received 11 March 2016; accepted 23 June 2016
Available online 17 July 2016

KEYWORDS
Arterial stiffness;
Drug treatment

During the Artery 14 meeting (Maastricht, the Netherlands, October 9–11 2014) a symposium was held on "Arterial Stiffness: a translational approach". The purpose of this symposium was to review current knowledge on the question whether arterial stiffness is a desirable target in the treatment of patients at cardiovascular risk. Three leading researchers in the field of arterial stiffness reviewed this question from different perspectives.

Luc van Bortel argued that arterial stiffness is now an established independent risk factor for cardiovascular disease. International hypertension guidelines have acknowledged the predictive value, reproducibility and cost-effectiveness of aortic pulse wave velocity (PWV) as a measure for arterial stiffness. The recent establishment of reference values for carotid-femoral PWV allow the study of long-term interventions that aim to reduce PWV. In the second contribution to the symposium Lorenzo Ghiadoni reviewed the effects of various antihypertensive drugs on arterial stiffness. Elevated PWV can be reduced by blood pressure lowering as such. However, certain antihypertensives can reduce PWV beyond the blood pressure lowering effect. This seems particularly the case for drugs interfering with the renin-angiotensin system and calcium antagonists. In the final presentation during the symposium Charalambos Vlachopoulos further elaborated this point by focusing on combination therapy as an effective way to reach cardiovascular benefits by altering arterial stiffness and central hemodynamics. He reviewed several recent clinical trials that show that combining an ACE-blocker with a calcium antagonist has the potential to reduce cardiovascular risk by reducing arterial stiffness and improving central hemodynamics.

Large artery research has come a long way: it started decades ago as a basic research line to investigate mechanical properties of the arterial system. The availability of relatively simple and reproducible techniques to measure arterial stiffness has widened the field in many directions, ranging for basic mechanistic studies to population-based risk analyses. We have now reached the translational stage in which (pharmacological) interventions can prove whether arterial stiffness is indeed a desirable therapeutic target. The three following short reviews nicely define the playing field for this future development.

This symposium was supported by an unrestricted educational grant from Servier.

* Tel.: +31 433881420.
E-mail address: h.struijkerboudier@maastrichtuniversity.nl.

http://dx.doi.org/10.1016/j.artres.2016.06.003

Conflict of interest

HSB has received honoraria from Durect, Merck-Serono and Servier.

References

There are no references in this introduction.