

Should older adults stop taking antihypertensive medication?

Clinical Question	Is it safe to withdraw antihypertensive medications used for hypertension or the primary prevention of cardiovascular disease in older adults?
Bottom Line	Results from this systematic review showed that as anticipated removing antihypertensives resulted in increased systolic and diastolic blood pressures. All included studies included resumption of therapy if blood pressure rose above SBP > 180 mmHg or DBP > 100 mmHg on three separate occasions, overall a third of participants restarted medication. However, for those that tolerated antihypertensive withdrawal, discontinuation may have little to no effect on all-cause mortality or stroke compared with continuation. It must be noted that the evidence was very uncertain about the effect of discontinuing antihypertensives on myocardial infarction. Unfortunately, none of the included studies reported on falls or fall risk.
Caveat	Most studies were over 20 years old, making them less relevant to current populations with different risk factors and treatment standards. The studies were small, with poor reporting of adverse reactions. None assessed frailty, a key factor in older adults' treatment.
Context	Hypertension, or high blood pressure, is common in older adults and increases the risk of cardiovascular events, kidney disease, cognitive decline, and death. Antihypertensive medications reduce these risks but can cause adverse effects, especially in older adults with multiple health issues. Managing these medications is challenging due to potential side effects and interactions. Deprescribing, or reducing unnecessary medications, can improve quality of life by minimizing adverse effects and interactions. However, stopping antihypertensive drugs may increase blood pressure and cardiovascular risks.
Cochrane Systematic Review	Gnjidic D, Langford AV, Jordan V, Sawan M, Sheppard JP, Thompson W, Todd A, Hopper I, Hilmer SN, Reeve E. Withdrawal of antihypertensive drugs in older people. Cochrane Database of Systematic Reviews 2025, Issue 3. Art. No.: CD012572. DOI: 10.1002/14651858.CD012572.pub3. This review contains 6 trials which included 1,073 participants.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD012572.pub3/full>