

SPIRONOLACTONE VERSUS EPLERENONE AS AN ADJUNCTIVE THERAPY IN PATIENTS WITH HEART FAILURE

Mohammad A K Hasan¹, Hossam Kandil² and Yasser Baghdady²

¹Egypt Air Hospital, Egypt

²Cairo University, Egypt

The goals of treatment in patients with HF are to improve their clinical status, functional capacity, and quality of life, prevent hospital admission and reduce mortality. This work aims to evaluate spironolactone vs. eplerenone as adjunctive therapy regarding tolerability in patients with heart failure (NYHA II to IV) already on anti-failure treatment with or without beta blockers or ivabradine and their effect on major adverse cardiac events. 100 patients are recruited and randomized in the study into two groups. Follow up of symptoms, signs; potassium level, BNP, renal functions, systolic function and side effects were done over three months in three visits. After three months, it was found that 29 patients (58%) showed good or marked improvement in the spironolactone group while in the eplerenone group, 39 patients (78%) showed that with significant P-value between both groups ($P < 0.01$). While those who showed no improvement or even worsening of their clinical conditions were six patients (12%) in the spironolactone group and five patients (10%) in the eplerenone group with non significant P-value between both groups ($P > 0.05$). Regarding side effects, the spironolactone group showed incidence of hyperkalemia in six patients (12%) in the spironolactone group with 0% incidence the other group with significant P-value ($P < 0.001$) on the other hand five patients (10%) had gynecomastia in the spironolactone group with 0% incidence in the eplerenone group with significant P-value ($P < 0.001$). These results told us that spironolactone and eplerenone are both effective with more efficacy towards the eplerenone, also the eplerenone is much safer than spironolactone when add as an adjunctive therapy in patients with HF and are kept on full medical therapy including BBs.

meesho_222@hotmail.com