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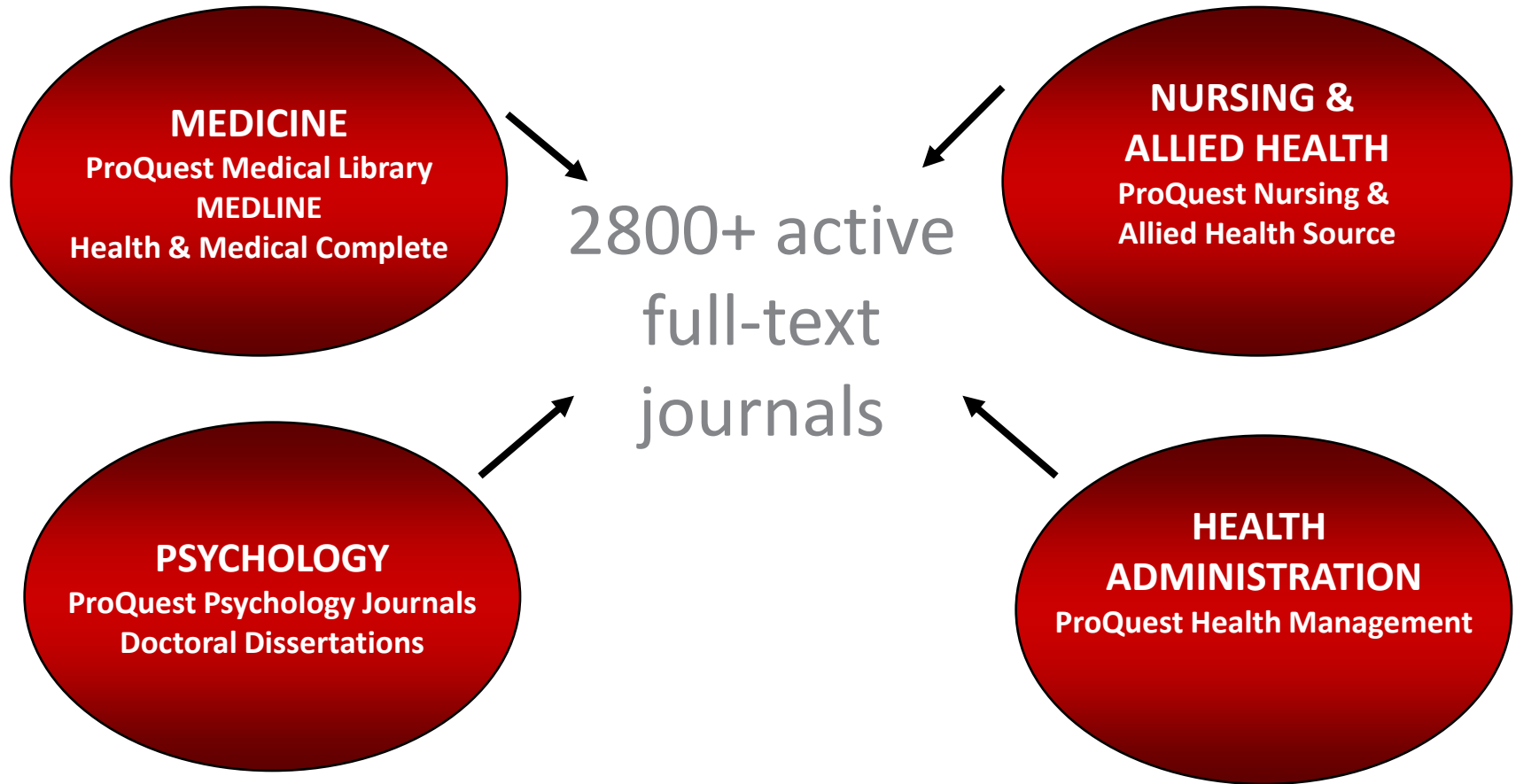


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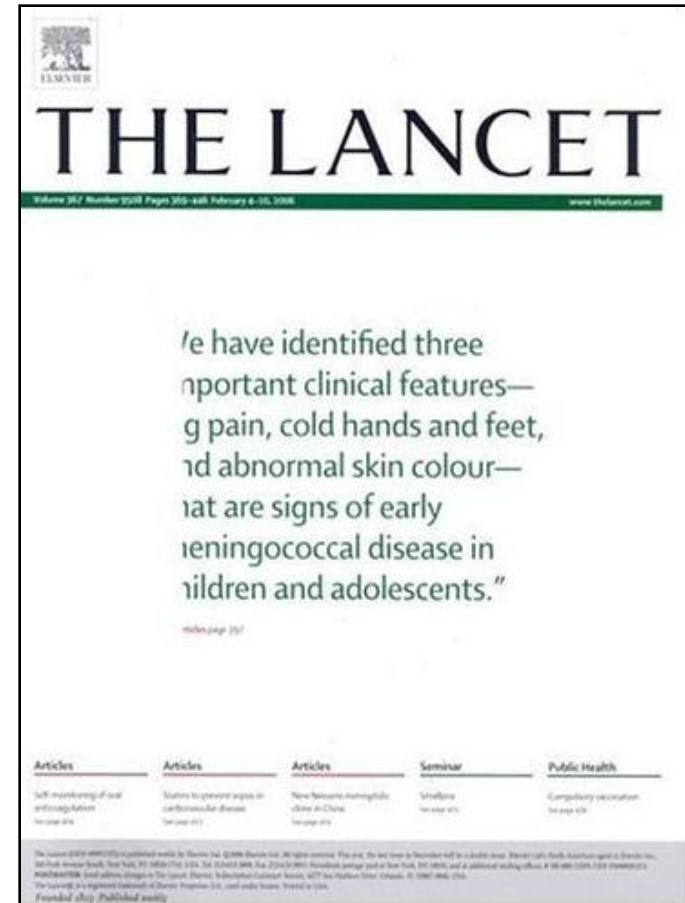
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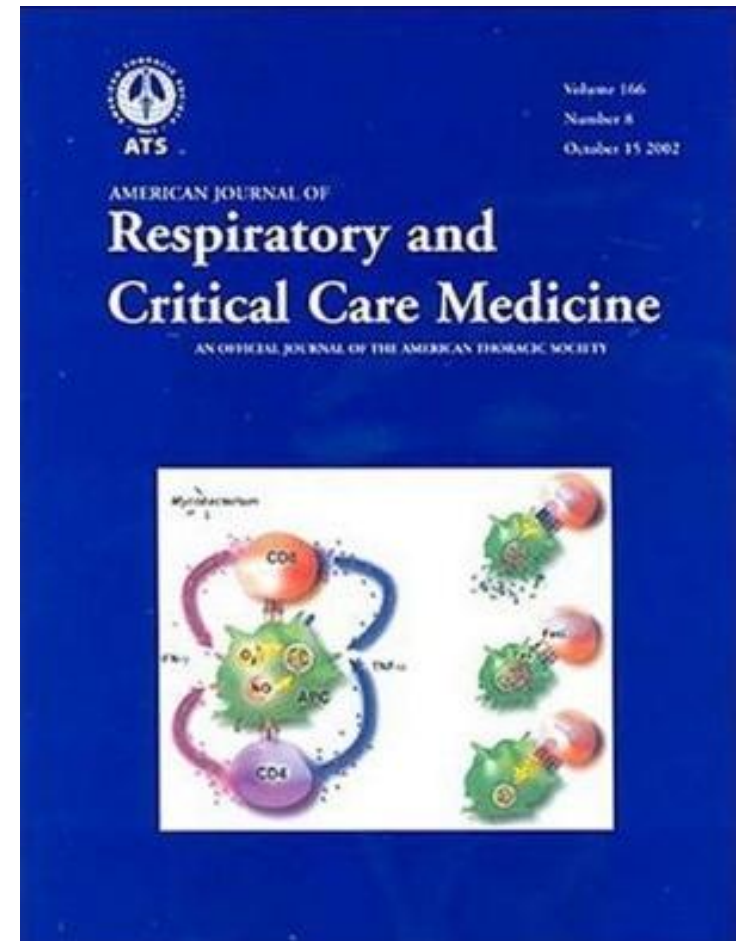
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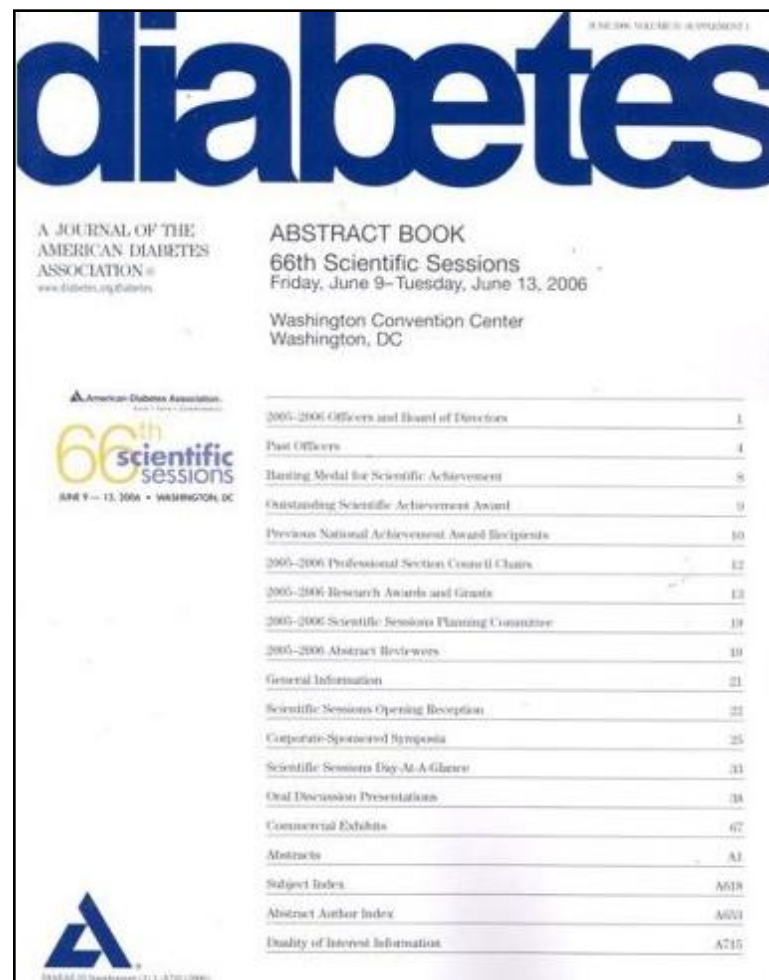
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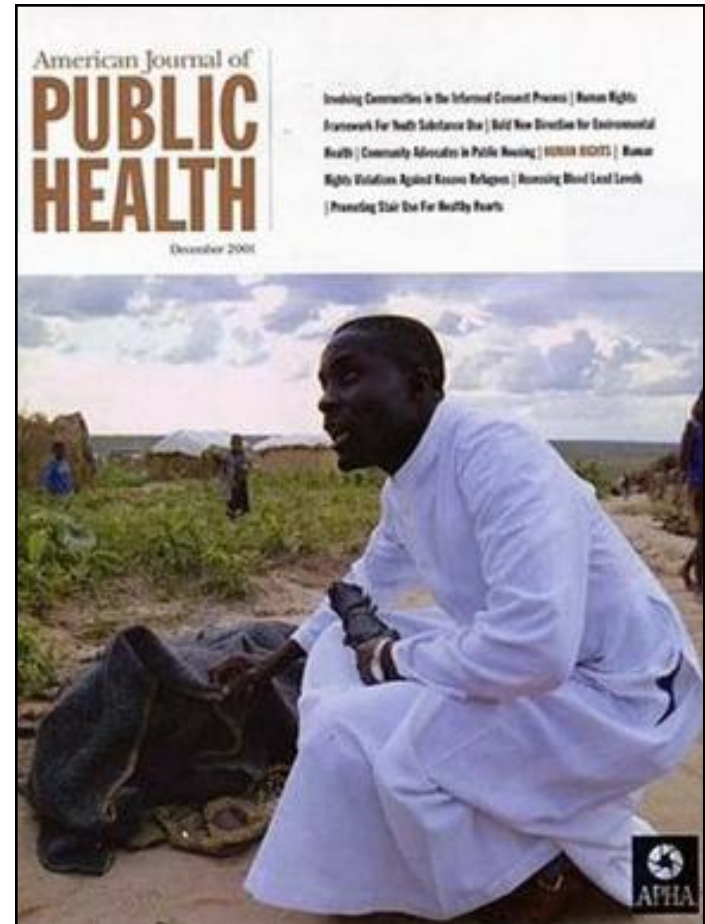
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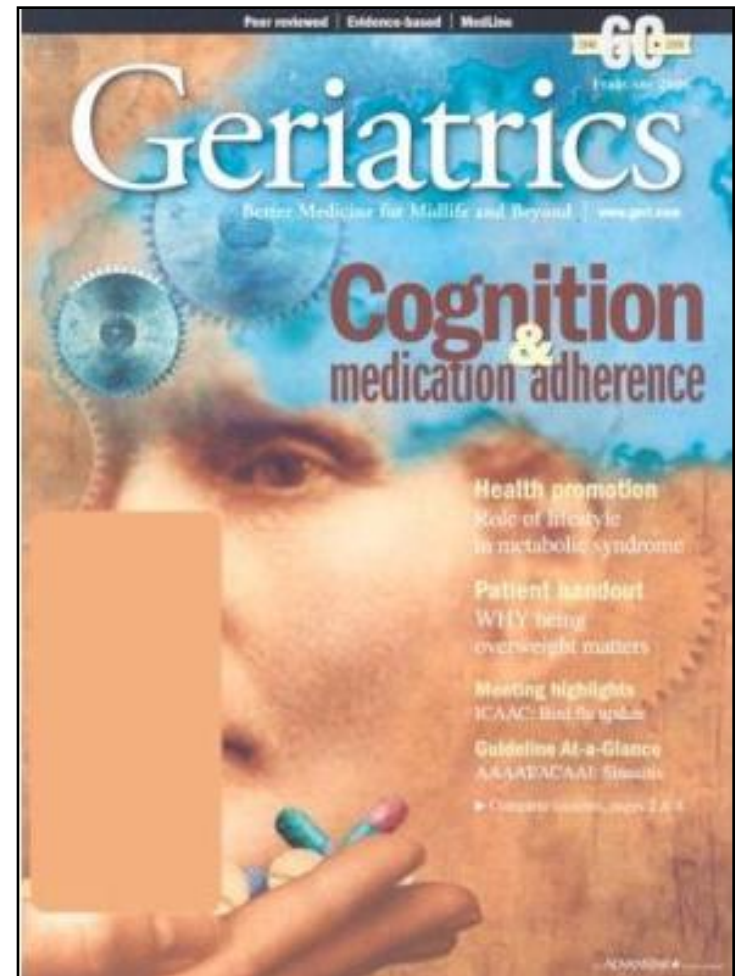
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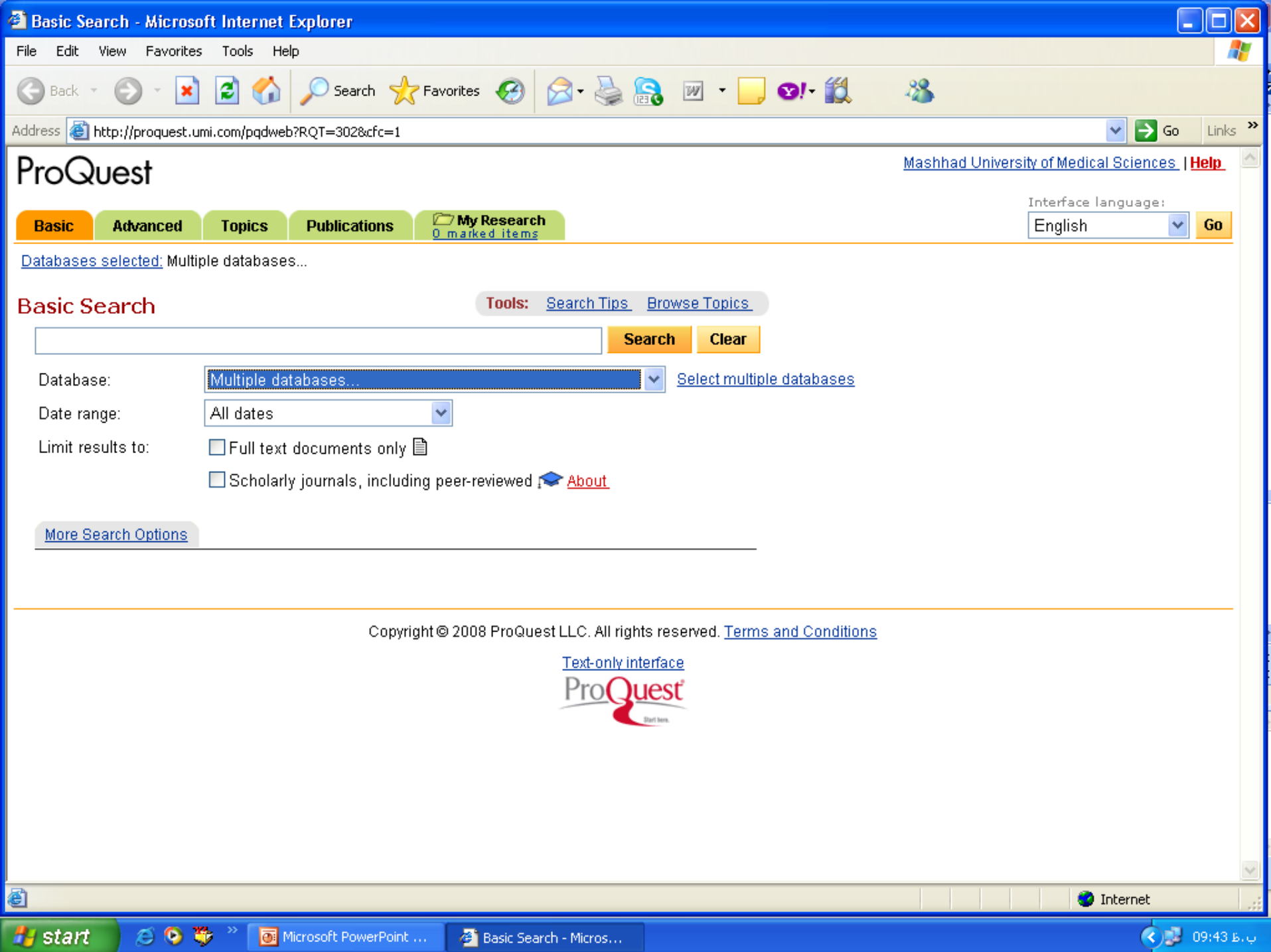
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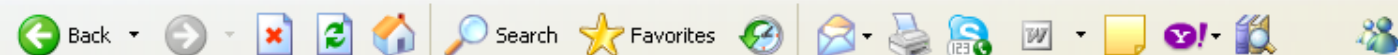
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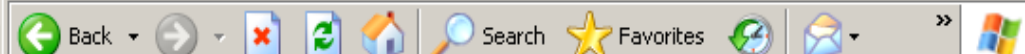
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V. Bertomeu, S. Guillén, P. Carrillo. PA AP Presion Arterial Revista de Hipertension Para la Atencion Primaria. Barcelona: 2007. p. 8
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Role of actions of **calcium antagonists** on efferent arterioles-with special references to glomerular hypertension

Koichi Hayashi, Yuri Ozawa, Keiji Fujiwara, Shu Wakino, et al. [American Journal of Nephrology](#). Basel: [Jul/Aug 2003](#). Vol. 23, Iss. 4; pg. 229

Abstract (Summary)

Although **calcium antagonists** are used as a first-line antihypertensive agent, controversy attends the renal microvascular effects of **calcium antagonists**. Since **calcium antagonists** elicit predominant vasodilation of the afferent arteriole, they might ostensibly aggravate glomerular hypertension. Recently, novel types of **calcium antagonists** have been developed, some of which are reported to dilate efferent as well as afferent arterioles. The present review attempted to characterize the renal microvascular action of **calcium antagonists**, and evaluated the consequences of renal injury following the treatment with these antagonists. In contrast to predominant afferent arteriolar action of conventional **calcium antagonists** (e.g. nifedipine, nicardipine, amlodipine and diltiazem), novel antagonists (e.g. manidipine, nilvadipine, benidipine and efonidipine) potently dilated both afferent and efferent arterioles. The vasodilator action on efferent arterioles appears to be mediated in part by the blockade of T-type calcium channels, particularly through the inhibition of the intracellular calcium release mechanism. The comparison of the anti-proteinuric action of **calcium antagonists** in subtotaly nephrectomized rats showed that efonidipine and enalapril, both possessing vasodilator action on efferent arterioles, exerted more prominent action than other **calcium antagonists**. Finally, in patients with chronic renal disease, a 48-week treatment with efonidipine reduced proteinuria, and this effect was seen even when the mean arterial blood pressure failed to reach below 100 mm Hg. In conclusion, although **calcium antagonists** potently inhibit afferent arteriolar constriction, efferent arteriolar responses to these agents vary, depending on the types of **calcium antagonists** used. These divergent actions of these agents on the efferent arteriole may alter differently the glomerular hemodynamics, and could affect the final outcome of underlying renal diseases.

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Received: February 23, 2003

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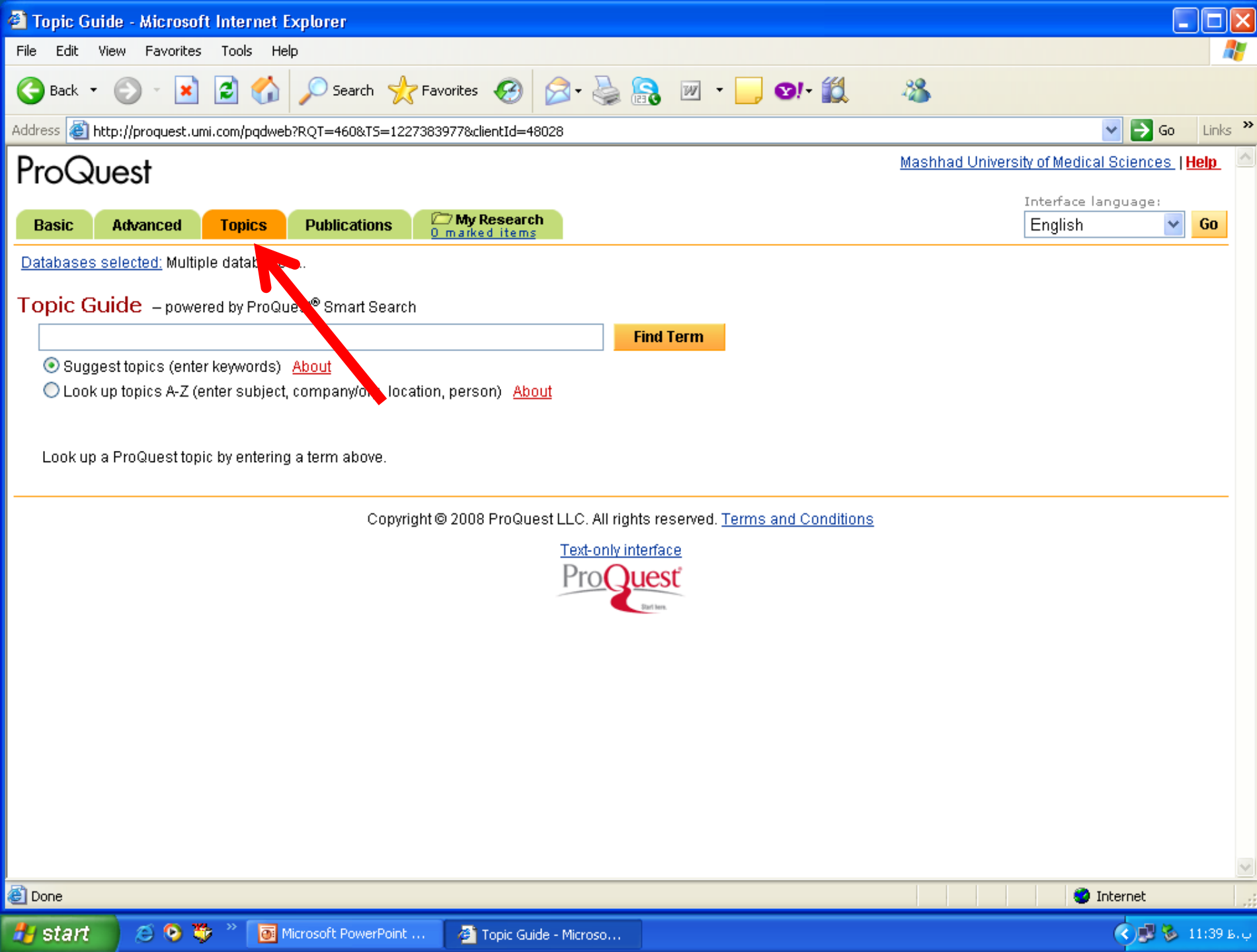
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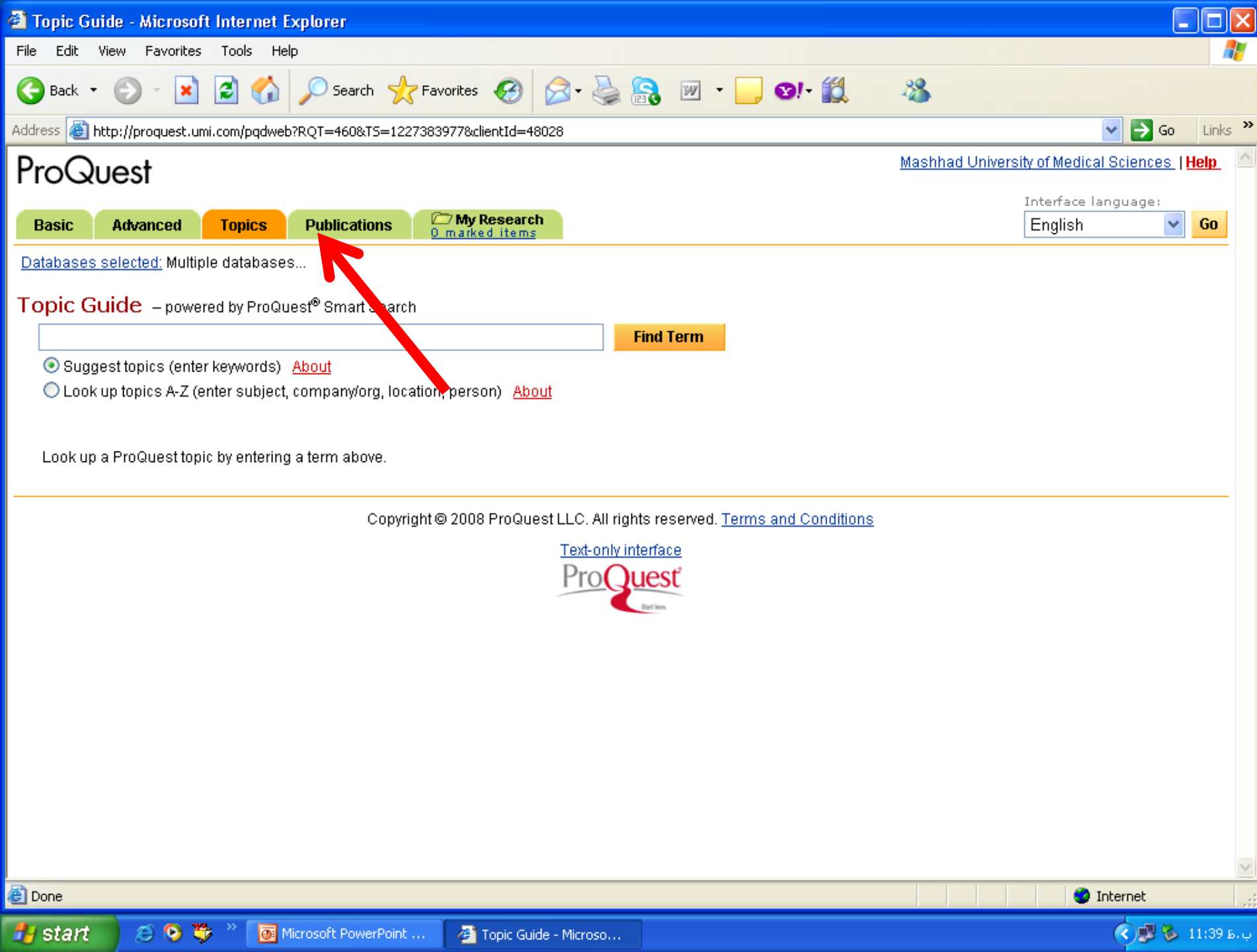
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Author(s):

- ☐ Koichi Hayashi





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