Uncritical Acceptance of Combination Treatment of Angiotensin II Receptor Blocker and Angiotensin-Converting Enzyme Inhibitor in Nondiabetic Renal Disease Trial Results

To the Editor:

We have just read the published editorial in the present issue of Hypertension by Kaplan1 with great interest. We very much agree with his comments and, in particular, share his concerns with respect to an uncritical acceptance of the results of “the bad trial” (Combination Treatment of Angiotensin II Receptor Blocker and Angiotensin-Converting Enzyme Inhibitor in Nondiabetic Renal Disease), given the many red flags that were apparently overlooked. Therefore, we were surprised to see ourselves cited (Reference 15) among the expert nephrologists who have accepted the results of the Combination Treatment of Angiotensin II Receptor Blocker and Angiotensin-Converting Enzyme Inhibitor in Nondiabetic Renal Disease Trial.2 Our cited review had, in fact, questioned the blood pressure–independent specificity of renin angiotensin system blockade in preventing the progression of renal disease.3 The citation is also particularly ironic, because one of us had questioned the veracity of the Combination Treatment of Angiotensin II Receptor Blocker and Angiotensin-Converting Enzyme Inhibitor in Nondiabetic Renal Disease ambulatory blood pressure monitoring data4 ∼18 months before Kunz’s letter of concern to The Lancet,5 as also noted recently in another editorial comment regarding the Ongoing Telmisartan Alone and in Combination with Ramipril Global Endpoint Trial.6

Disclosures

None.

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