



## Prescribing Tips for Candesartan

There is a range of candesartan preparations available. An up-to-date listing is available on the Irish Medicines Board website at [www.imb.ie](http://www.imb.ie).

### Therapeutic Indications

- Treatment of essential hypertension in adults.
- Treatment of adult patients with heart failure and impaired left ventricular systolic function (left ventricular ejection fraction  $\leq 40\%$ ) as add-on therapy to ACE inhibitors or when ACE inhibitors are not tolerated.

### Dosing and Administration

Full prescribing information is available in the Summary of Product Characteristics (SmPC) which may be accessed freely online at [www.medicines.ie](http://www.medicines.ie) or [www.imb.ie](http://www.imb.ie).

Please consult the SmPC for guidance on prescribing in special patient populations, e.g. renal or hepatic impairment.

**Table 1. Candesartan dosing and administration**

Indication	Initial Dose	Titration & Maintenance	Comment
Hypertension	8 mg once daily	Increase the dose to 16 mg and further to 32 mg according to BP response.	Most of the antihypertensive effect is attained within 4 weeks.
Heart failure	4 mg once daily	Double the dose at intervals of at least 2 weeks to target dose of 32 mg	

**DOSE** Prescribe the correct dose and frequency for the patient's condition – see SmPC for details.

- ✓ **Hypertension:** start with 8 mg once daily
- ✓ **Heart failure:** start with 4 mg once daily
- ✓ **Up-titrate** by doubling the dose at intervals of at least two weeks

**OPTIMISE** Patients benefit from higher doses when tolerated.

- In heart failure, the target dose of candesartan is 32 mg daily (or the nearest tolerated dose).

### MONITOR

- ✓ **Renal function** – serum creatinine and electrolytes should be checked before starting treatment, 1-2 weeks after each dose increase and at least annually, thereafter.<sup>62</sup>
- ✓ **BP** – ARBs can cause hypotension, particularly in patients with heart failure and in hypertensive patients with intravascular volume depletion such as those receiving diuretics.

### TARGET

- ✓ In most patients the **target SBP is <140 mmHg**. A **DBP target of <90 mmHg** is generally recommended, except in patients with **diabetes**, in whom values **<85 mmHg** are recommended.

Further advice on BP targets is accessible via NICE ([www.nice.org.uk](http://www.nice.org.uk)) and through the ESC website ([www.escardio.org](http://www.escardio.org))