The Robert M. Berne Cardiovascular Research Center Presents

A.H.J. Danser

*From dual renin-angiotensin system (RAS) blockade to Angiotensin Receptor/Nephrilysin Inhibition (ARNI).*

The application of a single RAS blocker often does not fully block the RAS, most likely due to feedback mechanisms resulting in renin and angiotensin rises. Because of this dual (or even triple/quadruple) RAS blockade has been tested in cardiovascular and renal patients. Unfortunately, this approach did not result in better efficacy, and yet was accompanied by more side effects. Therefore, more RAS blockade is not necessarily better, and we need alternative approaches on top of RAS blockade. One such approach is the inhibition of neutral endopeptidase. This talk will discuss the biochemical consequences of too much RAS blockade in humans and animals, particularly in the kidney, and then focus on a new approach, i.e., combined AT1 receptor blockade and neutral endopeptidase inhibition in hypertension and diabetes

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