Coffee consumption and the incidence of antihypertensive drug treatment in Finnish men and women.


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BACKGROUND: Only 2 prospective studies have previously investigated the association between coffee consumption and incident hypertension, and the findings are equivocal. OBJECTIVE: The objective was to determine the relation between coffee consumption and the incidence of antihypertensive drug treatment. DESIGN: We prospectively followed 24,710 Finnish subjects aged 25-64 y without a history of antihypertensive drug treatment, coronary heart disease, or stroke at baseline. Daily coffee consumption was assessed by questionnaires. RESULTS: During a mean follow-up period of 13.2 y, 2505 participants started antihypertensive drug treatment. The multivariate-adjusted (age, sex, study year, education, leisure-time physical activity, smoking, body mass index, high total cholesterol, history of diabetes, and alcohol, tea, fruit, vegetable, sausage, and bread consumption) hazard ratios for antihypertensive drug treatment associated with the amount of coffee consumed daily (0-1, 2-3, 4-5, 6-7, or >or=8 cups) were 1.00, 1.29 (95% CI: 1.09, 1.54), 1.26 (95% CI: 1.06, 1.49), 1.24 (95% CI: 1.04, 1.48), and 1.14 (95% CI: 0.94, 1.37) (P for trend = 0.024), respectively. This trend became marginally significant after additional adjustment for baseline systolic blood pressure (P for trend = 0.077). CONCLUSIONS: The results indicate that coffee drinking seems to increase the risk of antihypertensive drug treatment, and this risk was higher in subjects with low-to-moderate coffee intakes; however, there was no significantly increased trend in drinkers of approximately 1 cup (100 mL)/d or >or=8 cups/d.


PMID: 17684219 [PubMed - in process]