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Aortic dissection: decrease blood pressure but be aware of drug toxicity

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Abstract

Introduction: Aortic dissection (AD) is a diagnostic and therapeutic emergency that requires strict blood pressure targets. To achieve these objectives, the clinician is often required to prescribe a multiple and aggressive therapy exposing to a risk of drug toxicity including renal.

Case report: We report the case of a patient who presented with an AD type B of STANFORD, complicated by a drug-acute-renal-failure (ARF), requiring a hemodialysis session and a cessation of the majority of antihypertensive drugs, with very close monitoring until clinical improvement and normalization of clinical and biological parameters.

Discussion: The cornerstone of the management Type B AD is medical treatment with low blood pressure goals. However, the doctor must be alerted to side effects by respecting the rules of prescription in general, and knowing the situations with potential risk of developing adverse events. The knowledge of side effects allows their early diagnosis and appropriate care.

Conclusion: The tension equilibrium is a major objective in the treatment of the type B AD. To reach this objective, we often resort to a multiple and aggressive therapy, requiring vigilant monitoring of clinical and the paraclinical to detect its side effects early.

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