

# Meds for enlarged prostate tied to heart failure risk

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(hazard ratio [HR], 1.22; 95 percent confidence interval [CI], 1.18 to 1.26), intermediate for combination  $\beta$ -blockers/5ARIs (HR, 1.16; 95 percent CI, 1.12 to 1.21), and lowest for 5ARI alone (HR, 1.09; 95 percent CI, 1.02 to 1.17). The risk for [cardiac failure](#) was higher for nonselective  $\beta$ -blockers than selective  $\beta$ -blockers (HR, 1.08; 95 percent CI, 1.00 to 1.17).

"This is an important finding, given that BPH is so common among [older men](#), and that these medications are so widely used," a coauthor said in a statement.

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(HealthDay)—Medications used for enlarged prostate are associated with a small, but significant, increase in developing heart failure, according to a study published online Feb. 22 in *The Journal of Urology*.

Avril Lusty, M.D., from Queen's University in Kingston, Ontario, Canada, and colleagues used administrative databases to identify 175,201 men older than 66 years with a diagnosis of benign prostatic hyperplasia (BPH) between 2005 and 2015. The primary outcome of new cardiac failure was compared for men with 5-alpha reductase inhibitor (5ARI) exposure and/or alpha-blocker ( $\beta$ -blocker) exposure.

The researchers identified 8,339 men exposed to 5ARI, 55,383 exposed to  $\beta$ -blockers, and 41,491 using [combination therapy](#). There was a higher risk observed for cardiac failure among men treated with 5ARI and  $\beta$ -blocker, alone or in combination, versus men with no medication use. The risk for cardiac failure was highest for  $\beta$ -blockers alone

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