Save-a-Lot

The cheaper, the better for heart and blood pressure medications.

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So you think you get more if you pay more? Don’t believe the hype. This past January, a study comparing several types of drugs designed to reduce heart disease risk found that the oldest and cheapest worked just fine. In fact, the less expensive meds did as well, if not better, at controlling blood pressure and cutting the danger of heart failure in all study participants, regardless of race or sex.

The older drug variety, diuretics (chlorthalidone was used in the study), which typically cost about $36 a year, performed as well as two newer types: ACE inhibitors (such as Prinivil or Zestril) and calcium-channel blockers (such as Norvasc), whose annual cost is $280 and $680, respectively. The oldie did particularly well in people with at least one other heart disease risk factor such as diabetes or low levels of HDL, the “good” cholesterol. One reason cheaper meds may work better over time: Researchers have found that some folks stop refilling high-priced prescriptions. It might be time to ask your doctor about cheaper drug options.

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