



## TRIUMPH - TRiple Pill vs. Usual care Management for Patients with mild-to-moderate Hypertension - September 2016



The George Institute  
for Global Health  
India

### Facts:

- Globally, about 9 million people die every year due to cardiovascular complications resulting from high BP.
- In low-and-middle income countries (LMICs), 20-40% of adult population have high BP and these figures are projected to rise over the next decade.
- In LMICs, about a third receive treatment for high BP and of those who are treated less than a quarter have their BP controlled optimally.

### Partners:

RemediumOne, Sri Lanka

The George Institute for Global Health,  
Australia

### Supporters:

Global Alliance for Chronic Disease, GACD

National Health and Medical Research  
Council, (NHMRC) Australia

The George Institute for Global Health,  
India

### Background:

- High blood pressure (BP) is a leading risk factor for premature mortality globally, with the majority of the burden falling in low-and-middle-income countries.
- Despite the availability of proven effective BP lowering drugs and established management guidelines control of high BP remains poor. Conventional treatment may fail as it usually involves starting one drug, increasing the dose if blood pressure is not controlled and then sequentially adding additional medications – a potentially lengthy and therefore costly and time intensive strategy.
- Initial or early use of inexpensive low-dose combination BP lowering therapy has the potential to achieve better and more cost-effective BP control compared to this conventional stepped-care approach.

### Aims:

- The TRIUMPH study will investigate effectiveness, cost-effectiveness and acceptability of initial or early use of an inexpensive low-dose “3 in 1” combination BP lowering drug therapy compared to conventional treatment approach (stepped care) in the management of high BP.

### Methods:

- A randomised open parallel group trial will test the effectiveness of the “3 in 1” combination therapy compared to usual care in 700 participants with mild-to-moderate high BP in Sri Lanka.
- A formal economic and process evaluation will assess the cost-effectiveness and acceptability (by clinicians & patients) of the “3 in 1” combination therapy.

### Impact:

- The early use of triple combination BP lowering therapy is based on sound pharmacological principles and evidence that suggest maximum benefit and reduced risks of side effects with such an approach.
- This pragmatic implementation study of a treatment strategy within the existing health services system will promote highly generalisable evidence.
- If proven effective, this approach has potential to re-define the way high BP is treated and improve CVD health of millions in Sri Lanka and worldwide.

### Contact:

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