Angina pectoris. Papel benéfico da difenilhidantoína

Angina Pectoris

Bernstein, Gold, Lang, Pappelbaum, Bazika and Corday, *JAMA* (1965), 18 as part of a larger study, reported the effectiveness of PHT in the treatment of angina pectoris of six years' duration in a sixty-seven-year-old female. With PHT (100 mg three times a day), there was a marked improvement in the frequency and severity of the attacks, a decrease in the frequency of palpitations, and a dramatic decrease in need for nitroglycerin. Before PHT, she required twelve to sixty nitroglycerin tablets per week; and with PHT, she required none to four tablets per month.


Taylor, *Chest* (1974), 1611 reports the effectiveness of PHT in angina pectoris, based on a double-blind crossover study with sixteen patients. The patients had typical symptoms of angina pectoris including chest pain, discomfort and tightness, radiating to arm, neck or jaw, precipitated by exertion, emotion and cold, and accompanied by dyspnea. No drug therapy, apart from glyceryl trinitrate, was taken in the two-week period prior to the trial. The double-blind study showed that oral PHT used as a prophylactic significantly reduced the frequency of the attacks and the severity of symptoms in patients with angina pectoris.


Kotia, Haidia and Gupta, *Clinician* (1980), 2667 report a controlled study, with PHT and placebo, in thirty patients with ischemic heart disease and angina pectoris. All patients had stable effort-induced angina and all had ST changes at rest and on exertion. Fifteen patients were treated with PHT, 100 mg three times a day, and fifteen patients received placebo. PHT markedly reduced the incidence of anginal attacks (p<0.01). ST depression was also significantly improved (p<0.05) in the treated group.