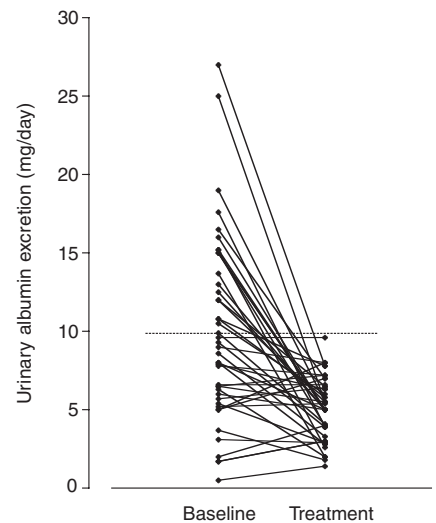


which hypertension and sympathetic hyperactivity coexist. In rabbits and humans, this is associated with left ventricular hypertrophy and systolic and diastolic dysfunction. Signolet *et al.* have exploited this animal model to demonstrate the ability of rilmenidine, a centrally acting sympathetic inhibitor, to reverse this dangerous syndrome. See page 54

### Albuminuria is common and reversible



Fresh insight by Cubeddu *et al.* expands the potential clinical relevance of albuminuria. The authors have demonstrated that albuminuria just below the conventional threshold for microalbuminuria is common among the large and growing obese, nondiabetic segment of the population. They also found that the albuminuria is readily reversed by a combination of diet, exercise, and metformin. See page 105

### The renin-angiotensin system and treatment of hypertension

Two reports in this issue illuminate the physiological heterogeneity of persons classified as hypertensive. Minami and Canzanello and their colleagues, in different circumstances, demonstrate that plasma rennin activity predicts the blood pressure response to blockade of the renin-angiotensin system. In an Editorial, Blumenfeld points out that if these findings can be more convincingly established, clinical trials should hereafter be undertaken in mechanistically homogeneous groups and thus overcome the current imprecision with which aggregate results obtained in studies of heterogeneous populations are applied

as if the “average” outcome had universal applicability. See pages 5, 10, and 61

### Improved diastolic function by central sympathetic inhibition

The rabbit with a Goldblatt kidney mimics the human condition in

