Enalapril and baroreflex function in normotensive subjects

We thank Doctors Ajayi & Reid for their comments (Ajayi & Reid, 1986) on our recently published paper in the *British Journal of Clinical Pharmacology* (Giudicelli *et al.*, 1985) on the effects of enalapril on arterial baroreflex in man. This study only demonstrated that enalapril (a) does not, like other angiotensin I converting enzyme inhibitors (ACEIs), alter arterial baroreflex function, as indicated by the lack of significant drug-induced modifications in gain and sensitivity (slope of the baroreflex function curves) during both activation (i.v. phenylephrine) or deactivation (i.v. nitroglycerin) of the reflex but (b) induces a shift to the left of this baroreflex function curve, indicating a 'resetting' phenomenon (Eckberg, 1980), which *per se* can account for the lack of reflex tachycardia after enalapril administration.

In addition, sympathetic activity was found not to be affected by enalapril since catechol-

amine plasma levels were not changed. But, these results clearly do not exclude that other mechanisms, e.g. enhancement of cardiac parasympathetic tone resulting from ACEIs-induced inhibition of angiotensin II vagal activation, might also contribute, as suggested by Ajayi *et al.* (1985a,b) and Ajayi & Reid (1986) to the lack of reflex tachycardia during ACEIs-induced blood pressure reduction.

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