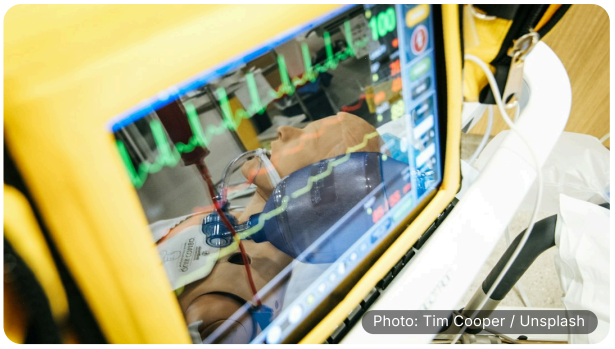
Baxdrostat offers lasting relief for hypertension

LEVEL A2/B1


Photo: Tim Cooper / Unsplash

I. WARM-UP

1. What helps you keep a healthy blood pressure?
2. Have you ever taken a pill every day? How was it?
3. Would you try a new medicine? Why or why not?

II. KEY VOCABULARY

cure
to make an illness go away completely

patient
a person who is getting medical care

pill
a small piece of medicine that you swallow

trial
a test of a medicine with patients to see if it works

hormone
a chemical in the body that sends signals to organs

surgery
a medical operation done in a hospital

tumour
a growth of extra cells in the body, sometimes not cancer

approve
to officially allow something after checking it

III. READING

A new drug called baxdrostat may help people with high blood pressure. In a small trial led by Prof Morris Brown in London, patients took daily pills for six to 12 months, and their blood pressure fell. Up to two years after they stopped, many still had lower pressure.

Some patients did not have to take any other blood pressure drugs. Researchers say the drug could even cure a common cause, but it is too early to be sure. In 5 to 10% of cases, benign tumours on the adrenal glands make too much of a hormone called aldosterone.

This tells the kidneys to keep salt, which raises blood pressure. The usual treatment is surgery to remove the gland. Baxdrostat is an aldosterone synthase inhibitor. It was approved in the US for hard-to-treat hypertension, and a larger trial is under way. Mason Freeman of Harvard University said the results could change how doctors test and treat patients.

Reading text adapted from reporting by **The Guardian***: "New drug could be cure for common cause of...". Original article linked at theenglishwire.com.*

IV. COMPREHENSION QUESTIONS

1. How long did patients take baxdrostat pills in the trial?
2. What happened to many patients up to two years after stopping the pills?
3. What common cause of high blood pressure does the drug target?
4. What is the usual treatment for this cause now?
5. Where has baxdrostat been approved so far?

V. DISCUSSION

1. Would you take a daily pill if it meant less medicine later? Why?
2. How should doctors explain risks and benefits to patients?
3. Which should doctors try first for this cause: surgery or pills? Why?
4. What makes medical news easy for you to understand?

VI. GRAMMAR FOCUS

Have to

Use have/has to + base verb to show need/obligation. Use don't/doesn't have to for "no need"; past: had to / did not have to.

*"Some patients **did not have to take** any other blood pressure drugs."*

*"If pressure stays low, patients **don't have to** see a surgeon."*

VII. GRAMMAR EXERCISE

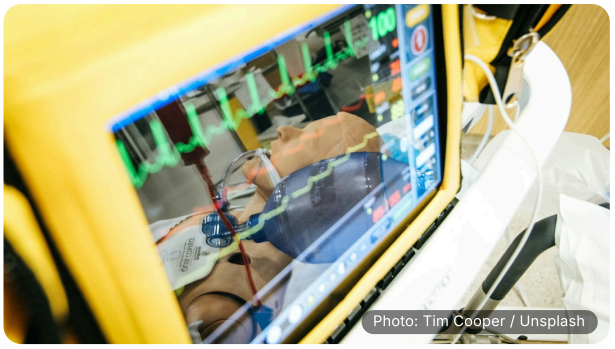
Complete the sentences with have to + verb. Use the right form.

1. My grandad's pressure is high, so he (take) ___ a pill daily. _____
2. My uncle (stay) ___ in hospital last year because he was ill. _____
3. With a home monitor, you don't (visit) ___ the clinic so often. _____
4. Do trial nurses (check) ___ salt levels each visit? _____
5. The gland will (be) ___ removed if drugs fail. _____

Teacher's Notes

TEACHERS ONLY

These notes are designed to help you get the most out of this lesson. Please do not share this page with students.


Photo: Tim Cooper / Unsplash

I. LESSON GUIDE

- Timing: 8–10 minutes warm-up, 8–10 minutes vocabulary, 10–12 minutes reading, 8–10 minutes comprehension, 8–10 minutes discussion. Combine grammar timing with reading if needed.
- Pre-teach or check: blood pressure, adrenal gland, pill, tumour, surgery, cure. Simple sketches can show gland → hormone → kidney.
- Run the reading twice: first for gist (what changed), then to find numbers (6–12 months, two years, 5–10%). Sensitive topic: illness and treatment can be personal; let students answer about the news, not themselves, and allow opting out of personal stories.
- Model a short discussion answer, then pair work before open class. If debate slows, ask students to list one benefit and one risk of pills and of surgery.

II. DISCUSSION FACILITATION TIPS

1. Start with a quick poll of hands, then put yes/no pairs together to swap reasons.
2. Elicit two clear examples of a risk and a benefit, then ask for simple pros/cons sentences.
3. Split class into two groups (surgery vs pills), then have each side summarise the other side's point.
4. Highlight helpful features in the text (short sentences, numbers), then ask students to add one tip of their own.

III. EXTENSION ACTIVITIES

Writing: In pairs, write an 80-word patient leaflet explaining what baxdrostat does and who might use it.

Role-play: Student A is a doctor, Student B a patient; discuss whether to try baxdrostat or have surgery (4–5 minutes).

IV. ANSWER KEY OVERVIEW

Comprehension questions: short factual answers from the text.

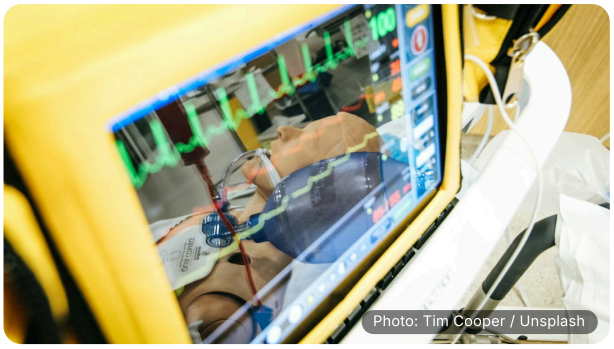
Grammar exercise: Have to

Discussion: open-ended. Accept any reasonable ideas supported by examples and reasoning.

Answer Key

TEACHERS ONLY

These answers are for teachers only. Please do not share this page with students.


Photo: Tim Cooper / Unsplash

IV. COMPREHENSION QUESTIONS

1. How long did patients take baxdrostat pills in the trial?
   For six to 12 months.
2. What happened to many patients up to two years after stopping the pills?
   Their pressure stayed lower, and some needed no other drugs.
3. What common cause of high blood pressure does the drug target?
   Too much aldosterone made by adrenal tumours.
4. What is the usual treatment for this cause now?
   Surgery to remove the affected adrenal gland.
5. Where has baxdrostat been approved so far?
   In the US.

V. DISCUSSION

Open answers. Accept any reasonable ideas supported by examples and reasoning.

VII. GRAMMAR EXERCISE

Complete the sentences with have to + verb. Use the right form.

1. My grandad's pressure is high, so he ___ a pill daily. **has to take**
2. My uncle ___ in hospital last year because he was ill. **had to stay**
3. With a home monitor, you don't ___ the clinic so often. **have to visit**
4. Do trial nurses ___ salt levels each visit? **have to check**
5. The gland will ___ removed if drugs fail. **have to be**

VI. GRAMMAR FOCUS

Key point: Use have/has to + base verb to show need/obligation. Use don't/doesn't have to for "no need"; past: had to / did not have to. (Example 2 constructed.)

> *"Some patients* **did not have to take** *any other blood pressure drugs."*
>
> *"If pressure stays low, patients* **don't have to** *see a surgeon."*