Angiotensin II

Established biology · indication-specific medicine.



Guide prepared November 13, 2026 · profile review dates retained

KEEP IN MIND Evidence applies to the studied formulation, route, population and outcome—not every product sharing a name.

01 What is it?

Angiotensin II is a hormone that raises blood pressure and participates in salt and fluid regulation. Its biology is central to cardiovascular medicine: excessive signaling can be harmful, while a manufactured form has a tightly defined role in treating certain forms of shock. [1]

02 Potential benefits

Maintains blood pressure and fluid balance during physiologic stress. Stimulates aldosterone and supports sodium retention. Synthetic angiotensin II is approved for certain adults with septic or other distributive shock. [1]

03 Evidence & its limits

The FDA approval label for GIAPREZA covers adults with septic or other distributive shock and warns about arterial and venous thrombosis. An ability to raise blood pressure in this setting must not be interpreted as general cardiovascular protection or a performance benefit. [1]

04 Risks & unknowns

Excess chronic signaling contributes to hypertension and cardiovascular or kidney injury. The approved drug carries thromboembolic risk and requires clinical monitoring. It is not a general energy or performance tool. [1]

05 Status & scope

Synthetic angiotensin II has an approved role in certain adults with septic or other distributive shock. This is a monitored critical-care use, not general cardiovascular protection. [1]

06 The question to ask

Does the evidence match the exact product, route, condition and outcome being discussed? Check the full record and its review dates. This summary is selective; the product label and clinical assessment contain additional warnings and contraindications.

SOURCES / Tap a reference to open

[1] Full evidence record, references and review dates
[2] I. H. Page: The discovery of angiotensin, historical account
[3] FDA GIAPREZA label
[4] Page and Helmer: original angiotonin experiment, 1940

Selective educational summary, not treatment or dosing advice. Existing profile review dates retained; no independent clinical review.