**Hypertension Protocol**

Measure blood pressure of all adults over 30 years

**Bihar**

High BP: SBP ≥ 140 or DBP ≥ 90 mmHg

Check for compliance at each visit before titration of dose or addition of drugs

**Step 1**

If Bp is high:

Prescribe Amlodipine 5mg

**Step 2**

After 30 days measure BP again. If still high:

Continue Amlodipine 5mg and add Telmisartan 40mg

**Step 3**

After 30 days measure BP again. If still high:

Continue Amlodipine 5mg and increase Telmisartan to 80mg

**Step 4**

After 30 days measure BP again. If still high:

Increase Amlodipine to 10mg and continue Telmisartan 80mg

**Step 5**

After 30 days measure BP again. If still high:

Continue Amlodipine 10mg, Telmisartan 80mg and add Hydrochlorothiazide 25mg (in the morning)

**Step 6**

After 30 days measure BP again. If still high:

Continue Amlodipine 10mg, Telmisartan 80mg and increase Hydrochlorothiazide to 50mg (in the morning)

After 30 days measure BP again. If still high:

Check if the patient has been taking medications regularly and correctly. If yes, refer to a specialist.

**Pregnant women and women who may be pregnant (missed periods)**

▲ DO NOT give Telmisartan or Chlorthalidone.

▲ Statins, ACE inhibitors, angiotensin receptor blockers (ARBs), and thiazide/thiazide-like diuretics should not be given to pregnant women or to women of childbearing age not on effective contraception.

▲ Amlodipine can be used. If not controlled with intensification dose, refer to a specialist.

**Diabetic patients**

▲ Treat diabetes according to protocol.

▲ Aim for a BP target of < 140/90 mmHg.

**Heart attack in last 3 years**

▲ Prescribe Metoprolol/Atenolol (25/50mg) and Amlodipine with initial treatment and refer to specialist.

**Heart attack or stroke, ever**

▲ Prescribe Aspirin (75mg) and Statin (10/20mg) and refer to specialist.

**Chronic kidney disease**

▲ ACEI or ARB preferred if close clinical and biochemical monitoring is possible.

**Investigation**

▲ Before initiating and several weeks after starting Telmisartan consider checking Serum Creatinine and Potassium.

**Lifestyle advice for all patients**

- Avoid tobacco and alcohol
- Exercise 30 min/day
- Reduce weight, if overweight
- Reduce salt, under 1 tsp/day
- Eat less fried foods
- Eat 5 servings of fruits and vegetables per day
- Avoid papads, chips, chutneys, dips, pickles etc
- Use healthy oils like sunflower, mustard, groundnut, etc
- Limit consumption of foods containing high amounts of saturated fats (cheese, ice-cream, fatty meat)
- Reduce fat intake by changing how you cook:
  - Remove the fatty part of meat
  - Use vegetable oil
  - Boil, steam, or bake instead of fry
  - Limit reuse of oil for frying
  - Avoid processed foods containing trans fats.
  - Avoid added sugar.

**Dispense drugs for 30 days and give appointment after 4 weeks**

**Medications should be taken at the same time each day**