**Step 1**

*If BP is high:*

**Prescribe Amlodipine 5mg**

*After 30 days measure BP again. If still high:*

**Increase Amlodipine to 10mg**

*After 30 days measure BP again. If still high:*

**Add Telmisartan 40mg**

*After 30 days measure BP again. If still high:*

**Increase Telmisartan to 80mg**

*After 30 days measure BP again. If still high:*

**Add Chlorthalidone 12.5mg**

*After 30 days measure BP again. If still high:*

**Increase Chlorthalidone to 25mg**

*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 become pregnant**
  - 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.
  - Calcium channel blocker (CCB) 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**
  - Add beta blocker to Amlodipine with initial treatment.

- **Heart attack or stroke, ever**
  - Begin low-dose aspirin (75mg) and statin.

- **People with high CVD risk**
  - Consider aspirin and statin.

- **Chronic kidney disease**
  - ACEI or ARB preferred if close clinical and biochemical monitoring is possible.

- If SBP ≥ 180 or DBP ≥ 110, refer patient to a specialist after starting treatment
- If SBP 160-179 or DBP 100-109, start treatment on the same day
- If SBP 140-159 or DBP 90-99, check on a different day and if still elevated, start treatment

**Recommended investigations at initiation of therapy:**
- Haemoglobin, blood sugar, urine analysis for proteinuria, serum creatinine
- Hydrochlorothiazide can be used if Chlorthalidone is not available (25mg starting dose, 50mg intensification dose)

**Lifestyle advice for all patients**

- Avoid tobacco and alcohol
- Exercise 2.5 hours/week
- 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, safflower, 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 excess sugar, carbonated/packaged drinks.
- Dispense drugs for 30 days and give appointment after 4 weeks
- Medications should be taken at the same time each day

**High BP:**

SBP ≥ 140 or DBP ≥ 90 mmHg

Measure blood pressure of **all adults** over 30 years.

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